

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Endoscopy*

Manuscript NO: 67172

Title: Percutaneous endoscopic gastrostomy and jejunostomy: Indications and techniques

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05301514

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-05 00:38

Reviewer performed review: 2021-05-11 15:51

Review time: 6 Days and 15 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

This is a review paper on PEG. PEG is a useful tool for enteral nutrition in patients with inadequate oral intake. Clinicians need to have a right knowledge about PEG to provide better nutritional interventions. This paper details the indications, contraindications, procedures, complications, and management of PEG and is instructive and valuable for clinicians. The manuscript is well written. I have several comments below:

1. INTRODUCTION Comment: The authors use "PTN" as an abbreviation for parenteral nutrition. However, I think "PN" or "TPN" is more common. Please revise it.
2. Comment: Some parts have a space before the reference number and some do not. Please check and correct throughout the manuscript.
3. Comment: In the middle of the introduction, the abbreviation for adverse events is defined as AEs, but at the end of the introduction it is once again defined as adverse events (AEs). Only one time definition of abbreviation may be enough.
4. Benign diseases Comment: It seems that the abbreviations "EMR" and "RFA" are not used in the subsequent sentences, so I think it may be unnecessary to define these abbreviations.
5. Other indications Comment: "(33) (18) (34)" at the end of this section should be modified to "(18) (33) (34)".
6. PRE-EVALUATION AND CONTRAINDICATIONS TO PEG PLACEMENT Comment: In the title of this section, "CONTROINDICATIONS" is a typo. "CONTRAINDICATIONS" is correct.
7. Comment: "VPS" is used as an abbreviation for ventriculoperitoneal shunts. Please define when it first appears
8. Comment: It seems that the abbreviation "LMWH" is not used in the subsequent sentences, so I think it may be unnecessary to define the abbreviation.
9. ENDOSCOPIC VS RADIOLOGIC VS SURGICAL GASTROSTOMY Page 9, lines 22-25; Comment: The authors'

description of P-values is not unified regarding uppercase or lowercase and space; "P = 0.006", "p<.001", "p= 0.002", "p=0.01", "p= 0.01", "p<0.001". Please unify the notation of P-values.

10. PERCUTANEOUS ENDOSCOPIC GASTROSTOMY TECHNIQUES Pull Technique Comment: "Gauder" is a typo. "Gauderer" is correct.

11. Introducer technique Page 11, lines 20-22; "Moreover, differences from the pull techniques are present also in the probe fixation. In this method, the probe presents a balloon tip inflated with saline, whereas an umbrella type tube is used in the pull type technique." Comment: I would not agree with this statement. This is because a bumper-button-type device can be placed using the introducer method [a,b]. Please delete or revise this statement. References (a). Horiuchi A, Nakayama Y, Tanaka N, Fujii H, Kajiyama M. Prospective randomized trial comparing the direct method using a 24 Fr bumper-button-type device with the pull method for percutaneous endoscopic gastrostomy. Endoscopy. 2008;40:722-6. (b). Shigoka H, Maetani I, Tominaga K, Gon K, Saitou M, Takenaka Y. Comparison of modified introducer method with pull method for percutaneous endoscopic gastrostomy: prospective randomized study. Dig Endosc. 2012;24:426-31.

12. ADVERSE EVENTS Gastrocutaneous fistula Comment: "(90)(91)(92)(93,94)" should be revised to "(90-94)".

13. PERCUTANEOUS ENDOSCOPIC GASTROSTOMY WITH JEJUNAL EXTENSION (PEG-J) Comment: It seems that the abbreviation "LCIG" is not used in the subsequent sentences, so I think it may be unnecessary to define the abbreviation.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Gastrointestinal Endoscopy*

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Position: Peer Reviewer

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Professional title: Chief Doctor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-17

Reviewer chosen by: Jing-Jie Wang (Online Science Editor)

Reviewer accepted review: 2021-12-15 14:31

Reviewer performed review: 2021-12-17 18:33

Review time: 2 Days and 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

All reviewer comments have been properly addressed in this revised manuscript. The quality of the manuscript has improved. However, I have a few minor comments below:

1. INTRODUCTION Comment: The authors used “TPN” as an abbreviation for parenteral nutrition. However, “TPN” basically means “total parenteral nutrition”. If the authors would use the abbreviation “TPN”, “parenteral nutrition” should be revised to “total parenteral nutrition”. Or, please consider using the abbreviation “PN” instead of “TPN”. Comment: Please remove the (AEs) parentheses at the end of this section. 2.

POST-PROCEDURAL CONSIDERATIONS Enteral tube replacement Comment: The authors described the balloon-type gastrostomy tube replacement interval as every 4 to 6 months at the end of this section. However, 3 months is one of the standard interval of the tube replacement. Please revise “every 4 to 6 mo” to “every 3 to 6 mo”.