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Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastrointestinal Endoscopy

**ESPS Manuscript NO:** 3606

**Title:** Uncomplicated spontaneous rupture of pancreatic pseudocyst into stomach: A case report.

**Reviewer code:** 00504581

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-09 21:52

**Date reviewed:** 2013-05-18 22:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

Case report : 1.- it is not clear why the authors think the patient had a chronic pancreatitis. we need more information and it should be best explained. There is not enough information in the case record to conclude about it 2.- it would have been interesting to perform and ercp in order to know if the patient actually had a chronic pancreatitis,and if the patient had an unstill unresolved rupture of the Wirsung duct 3.-It would be interesting to explain in the discussion how frequent this kind of complication in the setting of acute pancreatitis; how often an acute pseudocyst, following an acute pancreatitis, could evolve to an Spontaneous internal drainage into GIE tract regarding the literature reports



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### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastrointestinal Endoscopy

**ESPS Manuscript NO:** 3606

**Title:** Uncomplicated spontaneous rupture of pancreatic pseudocyst into stomach: A case report.

**Reviewer code:** 00183658

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-09 21:52

**Date reviewed:** 2013-05-24 22:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

The case report from India is aim to present a case of spontaneous resolution of a pancreatic pseudocyst with gastric connection. The title is "Uncomplicated spontaneous rupture of pancreatic pseudocyst into stomach: a case report". There have some questions and uncleared issues. The authors should be clarified and be added the following issues in the text.

1. In this case, the CT abdomen showed a pancreatic pseudocyst measuring 20 cms x 12 cms arising from body and tail compressing the stomach and atrophic pancreas. The patient should not be managed conservatively. The therapeutic interventions should be done. To date, there are different therapeutic strategies such as endoscopic transpapillary or transmural drainage, percutaneous catheter drainage or open surgery. Why did the physician do in this case?

2. The authors should be added the standard treatment of the pancreatic pseudocyst including the indications of the surgery in the text. It might be valued for the readers.

Thank you so much