

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 11708

Title: Review of diagnostic and therapeutic endoscopic retrograde cholangiopancreatography using several endoscopic methods in patients with surgically altered gastrointestinal anatomy

Reviewer's code: 01356099

Reviewer's country: Turkey

Science editor: Fang-Fang Ji

Date sent for review: 2014-06-18 18:27

Date reviewed: 2014-07-21 05:21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

ERCP in patients with surgically altered gastrointestinal anatomy is challenging because of the inability of the endoscope to reach the blind end owing to the long bowel passage. The Authors reviewed the success rate by using different types endoscopes and techniques to overcome to do ERCP in patients with altered gastrointestinal anatomy. There are many spelling and grammatical errors in the text. For example: ----The third challenge is the adhesion. In Japan, lymphadenectomy of malignant tumors was more likely to be performed, which in many cases (often) results --In order to (to) overcome these three challenges, various attempts have been made and reported. The text should be edited by a professional editor. This manuscript may contribute to the literature after edition.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 11708

Title: Review of diagnostic and therapeutic endoscopic retrograde cholangiopancreatography using several endoscopic methods in patients with surgically altered gastrointestinal anatomy

Reviewer's code: 02441422

Reviewer's country: Afghanistan

Science editor: Fang-Fang Ji

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

The endoscopic therapy for patients with surgically altered gastrointestinal anatomy had been considered to be a extreme difficult postoperatively if the conventional endoscopes were employed with pretty low success rates. To overcome these problems, balloon-assisted endoscopy (BAE) such as double-balloon endoscopy (DBE) or single-balloon endoscopy (SBE) and Spiral endoscopy (SE) has been developed recently to support and facilitate the application of ERCP under special situation. The authors tried to retrospectively analyze the published data to compare the success rates between different methods in order to provide a preferred method for the endoscopist, however, there are some drawbacks mentioned below. Majors 1) For the whole body of text, the description was pretty long-winded with the awkward English, Please simplify the sentence and correct the grammars to make the article well written, properly illustrated and excellently captioned. 2) Success rate was actually the only indicator in this review to make a comparion between differencnt types of endoscopy, whick seem to be superflcal. It is strongly recommended that "table" format was used to

effectively and clearly demonstrate the difference. 3) A large number of words was utilized to explain the process of DBE, SBE and SE, as one picture is worth thousands of words, please show the diagrammatic sketch for DBE, SBE and SE. Minors 1) The title "A useful tool for diagnostic and therapeutic ERCP using several endoscopic methods in patients with altered gastrointestinal anatomy", is kind of confused, it is suggested as "Endoscopic methods for diagnostic and therapeutic ERCP in patients with altered gastrointestinal anatomy". 2) The abstract is too long to be meaningful, pointless! what is the true goal of this review? 3) In abstract part, "though" among "As for DBE, the short-type DBE is applicable with more variety of devices, though it still confines itself to the limited availability of devices and its maneuverability due to the 2.8mm working channel." need to be corrected as "however". 4) In abstract part, "There are two major challenges to overcome to accomplish ERCP using BAE or SE", add "be" before "overcome". 5) In abstract part, "Comprehension of anatomical features of respective reconstruction method is important in decision of scope selection and adoption of inserting method, which is the key to raise the success rate of deep insertion to the blind end" please, modified as "Comprehension of anatomical features of respective reconstruction method is important in making decision of scope types and inserting methods, which are the keys to raise the success rate of deep insertion to the blind end". 6) In abstract part, "Second, regarding ERCP-related interventions, the difficulty of biliary cannulation is affected by whether with or without the papilla", whether with or without the papilla need to be replaced with existence of papilla or not. 7) Above list the errors in the abstract part, a large number of errors in the text body were found, please carefully correct them. ?

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Title: Review of diagnostic and therapeutic endoscopic retrograde cholangiopancreatography using several endoscopic methods in patients with surgically altered gastrointestinal anatomy

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Reviewer's country: Germany

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
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<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This manuscript by M. Shimatani et al. represents a nice overview about balloon-assisted (or spiral enteroscopy associated) ERCP-techniques. The manuscript is well prepared and the available literature is carefully considered. I suggest to include some schematic drawings of the postoperative anatomical situations that are described in detail in the manuscript. Further, some comments (or advices) of the authors which method (SBE, DBE or SE) should be used in the different anatomical situations may be helpful for the reader (e.g. in form of a graphical decision tree).