

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 24777

Title: Safety of Direct Endoscopic Necrosectomy in Patients with Gastric Varices

Reviewer's code: 02438659

Reviewer's country: China

Science editor: Yuan Qi

Date sent for review: 2016-02-09 14:26

Date reviewed: 2016-02-10 22:21

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

COMMENTS TO AUTHORS

The purpose of this paper is to determine the feasibility and safety of transgastric DEN in patients with WON and gastric varices. The results are feasible, safe and effective. However, there are some shortcomings about the paper, such as structure, language...

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 24777

Title: Safety of Direct Endoscopic Necrosectomy in Patients with Gastric Varices

Reviewer's code: 00160226

Reviewer's country: China

Science editor: Yuan Qi

Date sent for review: 2016-02-09 14:26

Date reviewed: 2016-02-23 14:46

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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 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"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		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

The authors performed a retrospective review of all patients with GV and received DEN. The authors concluded that the procedure is safe in this group of patients. Core tip: The authors described their technique of DEN as the "best practice technique". This may be misleading as it is only the authors preferred technique. In particular, immediate dilation of the track after puncture to 20mm may be considered by some to be associated with increased risk of perforation. And indeed two of the patients in the authors series presented in the reference suffered from major bleeding or perforation. Methods

- 1) Were the patients described in this paper included in your previous publication of 60 patients. Were there any overlap in presentation of the results?
- 2) If not, could the author compare the outcomes of this group of patients with the ones that did not have GV's? Thereby demonstrating the DEN in this group of patients is not associated with increased risk of adverse events?
- 3) What were the indication of DEN?
- 4) Did you allow for a period of transgastric drainage before DEN? As some of these WOPN may resolve with just drainage alone?
- 5) How do you decide to stop DEN? and how do you decide when a repeated procedure is needed?
- 6) How long are the stents placed for after complete necrosectomy?
- 7) Out of the 15 patients, only 5 had followup imaging. What happened to



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the others? How could you be sure that the collections have completely resolved? 8) Did any patients receive adjunctive treatment like nasocystic irrigation, ERCP with PD stenting? Results 1) Were there any other adverse events after DEN apart from bleeding? None of the patients had sepsis? 2) 2 patients suffered from delayed bleeding (13.3%). Can the authors comment on this rate of bleeding? How does this compare to those patients without GV (pls comment in discussion) Discussion Pls write up a more comprehensive summary of the current evidence, results from other series and also how the results of your group compare with those from other series and those patients that do not have GV

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 24777

Title: Safety of Direct Endoscopic Necrosectomy in Patients with Gastric Varices

Reviewer's code: 00503824

Reviewer's country: United Kingdom

Science editor: Yuan Qi

Date sent for review: 2016-02-09 14:26

Date reviewed: 2016-02-26 08:16

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

This is a retrospective series of patients who underwent direct endoscopic necrosectomy (DEN) in patients with gastric varices using EUS guidance, in a single centre tertiary referral centre. Major comments: ? These selected patients should be place in context of the experience of the authors. For example, the authors should give the total numbers of patients undergoing DEN and of these, how many were successful and what were the overall complications? ? The duration of follow up should be clarified. Five patients were followed up over a range of 19-36 months but what about the others? ? How long after the onset of pancreatitis did these patients undergo DEN? ? Did the authors use systemic antibiotics? ? What were the criteria for deciding on repeat endoscopy after the index DEN? ? Do the authors think that a metal self expanding double flanged lumen opposing stent would be of any advantage compared to a double pigtail stent? Minor comments: ? The authors should defined walled off necrosis. ? Abstract: the authors refer to the table in the abstract which would not be appropriate for this section. ? Abstract: the abbreviation IR is used and should be defined or the abbreviation avoided.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 24777

Title: Safety of Direct Endoscopic Necrosectomy in Patients with Gastric Varices

Reviewer's code: 00503857

Reviewer's country: Taiwan

Science editor: Yuan Qi

Date sent for review: 2016-02-09 14:26

Date reviewed: 2016-02-28 15:47

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The authors conducted a retrospective study regarding the safety of using EUS for guiding DEN in patients with pancreatitis and wall-offed necrosis. Although this study is retrospective with a small patient number, the topic is interesting. However, I still have major concerns to this manuscript. 1. In population and outcome section, the authors should clearly define the radiological criteria of pancreatic wall-offed necrosis, in which DEN was needed. 2. The authors should also describe the outcomes of the remaining 75 patients with WON but without gastric varices on imaging studies? 3. The authors should discuss more on the comparative results of patients receiving DEN or surgical drainage. In my opinion, some paragraphs of Introduction section should be described in Discussion section.