



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 25734

Title: Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection

Reviewer's code: 00502831

Reviewer's country: Japan

Science editor: Shui Qiu

Date sent for review: 2016-03-23 10:28

Date reviewed: 2016-03-24 19:25

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, SCIENTIFIC MISCONDUCT, CONCLUSION. It contains checkboxes for various evaluation criteria like 'Grade A: Excellent', 'Priority publishing', 'Google Search', 'Accept', etc.

COMMENTS TO AUTHORS

The authors described a series of cases with aberrant polypoid nodular scar (PNS) developed after gastric ESD. The authors concluded that PNS should be viewed as a benign alteration that does not require any type of intervention, other than endoscopic surveillance. This study is interesting and is the first report about a series of cases with PNS. But I have some questions as bellow.. #1. Why were there many of PNS on the antrum of the stomach? #2. There was lack of findings of submucosal component of PNS in this article. So the authors should present the histology or ultrasonic endoscopic findings of PNS. #3. Are there same phenomenon such as PNS after EMR? #4. How is the relationship between H. pylori and PNS? #5. What is the point of differential diagnosis between submucosal recurrence and PNS? #6 What is the feature of patients with PNS after ESD except for antrum?



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 25734

Title: Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection

Reviewer's code: 00045997

Reviewer's country: Japan

Science editor: Shui Qiu

Date sent for review: 2016-03-23 10:28

Date reviewed: 2016-03-25 18:41

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 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 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"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" 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

In this retrospective study, Arantes and colleagues assessed clinical relevance of aberrant polypoid nodule scar, a novel finding in the gastrointestinal region, after endoscopic submucosal dissection. Although this study has been well conducted in Japan and Brazil, major revision of manuscript is needed before it can be accepted for publication. The authors should clarify/correct the points listed below. Major 1. As for incidence of PNS, there is a big difference between the two centers (13.3% and 1.7%). Authors should discuss why this happened. 2. Authors described that PNS frequently occurred in the antrum rather than other parts in the stomach. They should show the incidence of PNS in each part individually and discuss why the antrum tends to harbor this lesion. 3. Is there any relationship between incidence of PNS and tumor size which mean the size of resected area? Minor 1. In Figure legends, numbering of Figure 2 is wrong.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 25734

Title: Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection

Reviewer's code: 01467363

Reviewer's country: Slovenia

Science editor: Shui Qiu

Date sent for review: 2016-03-23 10:28

Date reviewed: 2016-03-26 02:14

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"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" 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

I think it is appropriate to allow the reviewers to compare the contents of reference No. 4: "Arantes V, Uedo N, Pedrosa MS. Polypoid nodule scar after endoscopic submucosal dissection in the gastric antrum. Rev Gastroenterol Mex. In Press." before the final evaluation/decision of the article in WJGE.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 25734

Title: Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection

Reviewer's code: 02445518

Reviewer's country: Italy

Science editor: Shui Qiu

Date sent for review: 2016-03-23 10:28

Date reviewed: 2016-03-31 08:14

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"/> 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

The study : Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection From Arantes, is an interesting and particular study about the follow up of patients treated with ESD. It describe an aberrant scar condition that must be differentiated by recurrence and this can be considered a problematic suspect for the endoscopist. The study can be published after minor changes: Authors may remove from results that ...al patients were submitted to esd procedure ..and en blocR0 resection... because this are the inclusion criteria just presented in methods. Authors must add more information about their PNS. The different observed scar characteristics could be better described on a table and presented in relation to size, time of diagnosis from ESD and variations during follow up or information about eventual treatment. In discussion can be add eventual skills on how to differentiate PNS from other lesions



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 25734

Title: Clinical relevance of aberrant polypoid nodule scar after endoscopic submucosal dissection

Reviewer's code: 01429208

Reviewer's country: South Korea

Science editor: Shui Qiu

Date sent for review: 2016-03-23 10:28

Date reviewed: 2016-04-11 08:14

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 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 checked="" 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 author investigated cases with aberrant polypoid nodule after endoscopic submucosal dissection (ESD) in two academic institutions. However, ESD cases (60 vs. 343) and the prevalence of enrolled cases (13.3% vs. 1.7%) are a big difference in both institutions. That means the difference in experience between the two institutions is one of the important factors. Also, the prevalent lesion was antrum. The author didn't describe the distribution of location enrolled total ESD cases. In case of one center enrolled 8 cases, there's a possibility that all ESD cases are located in antrum. Therefore, this study has many confounding factors to generalize.