

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 03479389

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-01 20:25

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

COMMENTS TO AUTHORS

The authors described that the post-ERCP 2 h serum amylase levels and cannulation time may be useful markers in predicting the development of PEP. <Major> I expect the reanalysis of PEP in patients with a na?ve papilla of Vater. <Minor> In PEP cases with 2 h amylase levels greater than the cutoff level, how many cases are there in patients required more than 13 minutes for the cannulation? What kind of protease inhibitor did you use? Please describe the dose of protease inhibitor. How many patients did you use the pancreatic stent to prevent pancreatitis? In the pancreatic stent placement cases, please investigate the analysis of PEP.

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Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 03026750

Reviewer's country: Egypt

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-02 16:17

| CLASSIFICATION | LANGUAGE EVALUATION | SCIENTIFIC MISCONDUCT | CONCLUSION |
|---|--|--|--|
| <input type="checkbox"/> Grade A: Excellent | <input checked="" type="checkbox"/> Grade A: Priority publishing | Google Search: | <input checked="" 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 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

Although the study does not add too much, the manuscript is generally well written, and drawbacks were mentioned in study limitations

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Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 03474672

Reviewer's country: Brazil

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-13 20:18

| 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 type="checkbox"/> Plagiarism | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E: Poor | | [Y] No | <input checked="" 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

Dear authors, I enjoyed reviewing this paper. Well done and written. Many studies have been investigating the factors in the increasing risk of post-ERCP pancreatitis. Otherwise, this early amylase level analysis could contribute to the clinical practice, once it seems to be a good marker to predict pancreatitis. I would like to ask the authors some questions that are not clarified in the text. What kind of protease inhibitor was used? Please describe, dose and name them. In the Table 1: Patient characteristics, I suggest that the "others" ERCP indications could be more specific (name at least three more expressive causes) since it corresponded with 30% of your sample. Another important piece of information is to mention in the method if the ERCP procedures were performed by expert endoscopists or fellows. Is your hospital a teaching hospital? It would be interesting if the authors could consider these suggestions. This constructive criticism should assist the authors in improving their manuscripts and I will be pleased to indicate this manuscript for publication

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 03475242

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-16 14:48

| 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 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"/> 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 type="checkbox"/> Grade D: Rejected | <input checked="" type="checkbox"/> No | <input checked="" 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

This retrospective study was performed to identify the risk factors for post-ERCP pancreatitis, and the authors revealed that two factors of serum amylase levels 2 h after ERCP and cannulation time were significant independent factor. This is well designed study which revealed interesting results. The followings are my comments. (1) This is a retrospective cohort study, but please explain the reason why more than 90% of the patients could have serum levels of amylase measured at 2 hour after procedure. Do you have a special protocol in the performance of ERCP? (2) In your hospital, how could precise records of cannulation time and procedure time be obtained?. For each ERCP procedure, were these times recorded by a nurse or doctor? (3) This paper studied 1,403 procedures in 725 patients who underwent ERCP. Therefore, on an average, each patient received ERCP twice. This study cohort included repeat-ERCP patients in more than half of the study group. I think therefore that the authors should add repeated time of ERCP as one of risk factor analysis. Anyway, you added the factor of naive papilla.

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Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 01438495

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-17 15:30

| CLASSIFICATION | LANGUAGE EVALUATION | SCIENTIFIC MISCONDUCT | CONCLUSION |
|--|--|--|--|
| <input type="checkbox"/> Grade A: Excellent | <input checked="" type="checkbox"/> Grade A: Priority publishing | Google Search: | <input checked="" 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"/> 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

To conclude that 2 times value of amylase 2 hours after ERCP is considered to be the threshold of PEP is interesting. This paper is worth to be read for clinician of pancreatobiliary disorders.

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Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 28381

Title: Combination of 2 h post-ERCP amylase levels and cannulation times is useful for predicting post-ERCP pancreatitis

Reviewer's code: 03476646

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 18:23

Date reviewed: 2016-07-27 23:57

| 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 checked="" 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

To authors: This study lacked of 117 procedures with the following conditions were excluded: 1) gallstone pancreatitis, 2) unreachable to papilla, and 3) missing data of procedure time or serum amylase levels. Thus this study may have low confidence level. And the contents of this manuscript may have low impact. Major 1: The similar sentences of the contents "Andriulli et al. reported a systematic... However, very few good positive predictive values (PPVs) for PEP exist." is described on discussion. It seems persistently. Thus, Those may be better that those sentences of the contents are described on only discussion or introduction. Major 2: Did you compare between contrast method and wire-guided method, and consider the details included of complications? If you didn't, the sentence that there is no difference of the PEP incidence in contrast method and WG method may be better to be added to the text and reference. Minor 1: The word of "occurs" (on page 5, line 21) should be changed to "occurred". Minor 2: You wrote the sentence "Many studies have investigated the factors that increase the risk of post-ERCP pancreatitis." On page 6 line 1. If so, some references should be shown. Minor 3: The mean of EBS on Table 3 is EBS without EST?