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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 00029045

Reviewer's country: Italy

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-06 16:02

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

This is a systematic review comparing different treatment of pancreatic pseudocyst. I have the following comments/suggestions on this report. Please include the indication for treatment of pancreatic pseudocysts. Please include the classification of pancreatic fluid collection in a table. What the au meant as "the article was thought to be relevant" How the final decision was made about the inclusion. On the basis of the limitations of the current study, as evidenced by the AU (see discussion) I believe that a clear conclusion comparing the different approaches could not be made at present and this point have to be very clearly evidenced in this paper.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 00038617

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-07 00:26

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

This is the systematic review comparing percutaneous, endoscopic and surgical drainage of pancreatic pseudocyst. Overall, this paper is well written. Since there is few systematic review in this issue to date, this review is valuable for publication. The references are selected appropriately. I have no further comment for revision.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 02544032

Reviewer's country: Norway

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-07 16:54

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"/> 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 manuscript gives an overview of publications on outcome of endoscopic drainage of pancreatic pseudocysts, compared with percutaneous and/or surgical drainage. Figure 1 illustrates that very few comparative studies were found, and table 1 reveal that most studies are "old". Ie. in four series inclusion ended in 2007, in one 2009, and most of the others are even from the nineties. Another problem with the present manuscript is that some basic concepts might be misunderstood, for example (introduction, line 6): "Pancreatic pseudocysts are traditionally managed by open surgical internal drainage". This is simply not true - and the focus of the paper becomes inappropriate. Primary and secondary outcome is chosen without inclusion of procedure related complications. There might be an alternative to review the literature again with adjusted focus. Probably can more results be found, if the perspective is expanded.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 00004764

Reviewer's country: United States

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-08 05:08

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"/> 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

Your comprehensive well organized manuscript reviews the issue of pseudocyst drainage. This is one of interest to gastroenterologists and endoscopists. Specific Comments 1. It is very important to make sure that this only includes patients with pseudocysts. As you know we have learned over the years that pancreatic necrosis is very common with significant pancreatitis in that most collections, in fact, result from necrosis. Thus, it may be very difficult to completely exclude that necrosis could have been present. I would agree that abscesses are more likely to be excluded radiographically. 2. Do we know that transpapillary stenting was not used or if so should those patients be handled separately? 3. You mention an adverse event rate of 67% in one study of percutaneous drainage. It would be important to know what the adverse events were and if we know that fistulas were created. 4. When discussing EUS vs EGD drainage, you did mention the one study with two patients having significant bleeding. What were the overall complications for the EGD group as compared to the EUS group? 5. Under Discussion you mention whether surgical drainage is preferred over percutaneous drainage. I assume there have been no comparative studies. The limited



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comparative data would suggest that EUS is preferred but as you mentioned may not be available at all centers. Nevertheless, the issue of percutaneous drainage for a simple pseudocyst needs to be better explored. 6. Methods - Provide definitions of outcome variables being compared in the different studies i.e. treatment success, recurrence rates, re-intervention and adverse events. 7. Tables - Include countries of publication in Table 1. Please add duration of follow-up for each study in Tables 4,5,6. Table 5: the size of PFC and duration of hospitalization are given in median and IQR in the RT by Varadarajulu et al, and not mean (IQR), please correct. Table 6: Explanation of alpha is given in the footnote but no alpha is listed in the table as superscript. Please remove alpha from the footnote.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 00050424

Reviewer's country: Greece

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-10 06:10

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"/> 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

It is an interesting systematic review but the authors included both recent and very old studies (since 1980). The authors should emphasize that classification of pancreatic lesions has changed during the last years (new Atlanta classification). Some pancreatic lesions originally characterized as pseudocysts are walled off pancreatic necrosis and the management would be different in these cases.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 23487

Title: Systematic review comparing endoscopic, percutaneous and surgical pancreatic pseudocyst drainage.

Reviewer's code: 00051235

Reviewer's country: United States

Science editor: Ya-Juan Ma

Date sent for review: 2015-11-25 09:42

Date reviewed: 2015-12-22 04:29

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input checked="" 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

This manuscript attempts to review the available literature regarding various modalities of drainage for pancreatic pseudocysts. Unfortunately, due to the small amount of high-quality studies available for review, analysis in the form of a meta-analysis could not be performed. The study thus is presented in a descriptive form (much like a review), yet the studies contained are quite old. Only plastic stents are used and most of the surgical studies use open techniques. For a topic like this, with a flood of recent publications regarding metallic stents and minimally invasive approaches (step-up, combined approach), I think expanding the study to include more current studies would go a long way towards making this study clinically relevant. In its current form it is already somewhat outdated.