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8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: editorialoffice@wjgnet.com

http://www.wjgnet.com

ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Pathophysiology

ESPS Manuscript NO: 10467

Title: Role of new hemostatic powders in the endoscopic management of gastrointestinal bleeding

Reviewer code: 00029041

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-02 17:41

Date reviewed: 2014-04-03 10:19

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" 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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This is an excellent review to be published.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Pathophysiology

ESPS Manuscript NO: 10467

Title: Role of new hemostatic powders in the endoscopic management of gastrointestinal bleeding

Reviewer code: 00502803

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-02 17:41

Date reviewed: 2014-04-12 10:18

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The review article looks well into the role of new hemostatic powders used for the control of GI bleeding. The followings concerns needs to be addressed: 1. Instead of a comprehensive review in the present format it appears more of an individual description of these agents with support from the literature. 2. It needs to be presented in a form of a review with the details from the published reports with their opinion on the pros and cons of this new method. 3. I am not sure if the authors have any personal experience in the use of these hemostatic sprays. If so their experience. 4. It is too long and a brief report on these methods should be preferable.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Pathophysiology

ESPS Manuscript NO: 10467

Title: Role of new hemostatic powders in the endoscopic management of gastrointestinal bleeding

Reviewer code: 00050424

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-02 17:41

Date reviewed: 2014-04-13 19:27

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In this review the authors analyze the current knowledge on the use, efficacy and safety of three new endoscopic hemostatic methods. Although the substances used in each method are different they seem to have similar mechanisms of actions and safety profile. I think that this review should be shortened significantly to become comprehensive. It is very complex for the average reader to read too many small studies (with 5-10 patients) with similar results. The authors analyse each study separately. It would be better to present similar studies with similar results together. Also safety profile, technical issues are similar for the three powders and could be presented together. I think that the majority of the first and second paragraph of the introduction is redundant. Also, many sentences in the conclusion section should be deleted (it is repetition). The mechanism of action of ABS should be presented in a more simplified way to become understandable by an endoscopist. The authors present anything is known in a complex way. In table 2 the authors say that hemostatic powders can be used as adjuvant therapy in patients with high-risk for rebleeding lesions and after failure of conventional methods. Are there data to support these indications ;;;; It should also be emphasized and presented with criticism : 1. There is no randomized controlled trial comparing older established methods (adrenaline injection , etc.) with hemostatic powders. This weakens the promising results of all these studies presented by the authors. 2. The cost of the new methods compared with other established methods, especially adrenaline injection (very important). 3. The lack of long term efficacy especially in patients with cancer related bleeding or variceal bleeding. Do the authors mean that hemostatic powders can replace band ligation ;;;



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Pathophysiology

ESPS Manuscript NO: 10467

Title: Role of new hemostatic powders in the endoscopic management of gastrointestinal bleeding

Reviewer code: 00762422

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-02 17:41

Date reviewed: 2014-04-23 06:45

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B (Very good)	<input type="checkbox"/> [Y] Grade B: minor language polishing	<input type="checkbox"/> [] Existed	<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"/> [] No records	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> [] Grade D (Fair)	<input type="checkbox"/> [] Grade D: rejected	BPG Search:	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> [] Grade E (Poor)		<input type="checkbox"/> [] Existed	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> [] No records	

COMMENTS TO AUTHORS

Very nice review of an new therapeutic option in acute GI Bleed. The authors should clarify and stress further that there is no role that has been shown for non-bleeding lesions (eg a visible vessel). Also, I do not believe there is sufficient evidence to recommend this technique as an adjuvant therapy in lesions with high risk of rebleeding and would thus remove that indication from table 2



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Pathophysiology

ESPS Manuscript NO: 10467

Title: Role of new hemostatic powders in the endoscopic management of gastrointestinal bleeding

Reviewer code: 00053417

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-02 17:41

Date reviewed: 2014-04-24 16:40

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
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<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Recently, hemostatic powders have been added to endoscopic armamentarium to treat gastrointestinal (GI) bleeding. Three hemostatic powder products are available mainly in European countries. In this manuscript, the authors reviewed the mechanisms, efficacy and safety of these products used in endoscopic treatment of GI bleeding. Although, a few reviews have been published in this topic, an updated review may still provide additional information to the readers. There are some reservations about the review, which needs revision: 1 As the three products are largely similar, there is no need to introduce them one by one. It is suggested to put them together so as to shorten the article. 2 Endoscopic hemostatic therapy for GI bleeding has been well documented, and is not directly relevant to this topic. It is suggested to cut short the contents in the field (in introduction section).