



**PEER-REVIEW REPORT**

**Name of journal:** *World Journal of Clinical Pediatrics*

**Manuscript NO:** 89580

**Title:** Evolving Strategies: Enhancements in Managing Eosinophilic Esophagitis in Pediatric Patients

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 00068278

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Professor

**Reviewer’s Country/Territory:** Turkey

**Author’s Country/Territory:** United Arab Emirates

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-12-01 07:33

**Reviewer performed review:** 2023-12-11 13:48

**Review time:** 10 Days and 6 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

Pediatricians or pediatricians; esophageal or oesophageal; They should be used with the same spelling throughout the article. Abstract: “We aim to describe the definition, presentation, diagnosis” pleased add “of eosinophilic esophagitis.”. When the abbreviation is used for the first time, its full form should also be written; for example PPI Page 3; “Many patients have associated atopic disordered (change to disorders) including eczema, allergic rhinitis, respiratory symptoms related to asthma, and allergic reactions to food “Page 9, paragraph 3; costicosteroid – corticosteroid Page 9, paragraph 2; “A study by Rank et al. with 1051 patients proved PPI’s therapeutic effectiveness and efficacy. [20]” Instead of this sentence, it would be more accurate to write it “in a systematic review by Rank et al. ....” Page 13, last paragraph before Future Directions; abbreviation must be HRQoL. Page 14, last paragraph; “Cytosponge is a sponge-containing capsule after being swallowed it (delete will) collects esophageal tissue as it’s pulled back, offering an easy method to assess EoE inflammatory activity [38 ].” Page 20, last paragraph; EoE inflammatory – EoE inflammatory The mechanisms by which the drugs used in treatment, especially biological agents, act should be written.



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For example, Dupilumab, a human monoclonal antibody that targets the interleukin-4 (IL-4) receptor alpha subunit of heterodimeric IL-4 and IL-13 receptors. Discussing the management under subgroups such as dietary elimination, pharmacological treatment, endoscopic interventions, and biological agents will make it easier for the reader to follow. It would be nice to provide brief information about the use/efficacy of other biological agents (e.g. mepolizumab, reslizumab, omalizumab, cendaakimab, dectrekumab, lirentelimab).