

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18902

**Title:** Efficiency of upper gastrointestinal endoscopy in pediatric surgical practice

**Reviewer's code:** 00742182

**Reviewer's country:** United States

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2015-04-29 09:24

**Date reviewed:** 2015-04-30 00:40

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 type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

General What are the current technological advances that we may anticipate. What about credentialing and training – who should be doing these procedures – in many parts of the world this is being done by GI specialists and not surgeons – who should be doing them? How about maintenance of competence – how many should one do annually to maintain competence? Specific 1. The authors indicate that they will break things into two headings (dx and tx) then introduce anesthesia as their first heading. This is unwieldy – please fix. 2. Sedation with analgesia does not make sense – please clarify 3. Is dyspepsia really the main indication for dx endoscopy? Is reflux a better term? 4. Word choice – “raised endoscopy..” Please fix 5. Is there still a role for rigid endoscopy? If so in what situations? 6. Are only patients with mental retardation ingesting foreign bodies? This has not been this reviewer's experience. 7. Spelling – “jewlelery” 8. The authors should refrain from declaring that a procedure by itself is safe. It is only safe if the person performing it is adequately trained. The authors have cited many potential complications – as such no technology is truly safe. 9. What is – Prolapsgastropathy?

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18902

**Title:** Efficiency of upper gastrointestinal endoscopy in pediatric surgical practice

**Reviewer's code:** 02445125

**Reviewer's country:** India

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2015-04-29 09:24

**Date reviewed:** 2015-05-15 13:47

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

A review on role of UG Endoscopy in pediatric surgical practice has been presented. Most of the information included is already available in the literature

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18902

**Title:** Efficiency of upper gastrointestinal endoscopy in pediatric surgical practice

**Reviewer's code:** 00502907

**Reviewer's country:** United States

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2015-04-29 09:24

**Date reviewed:** 2015-05-09 01:15

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 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 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

The manuscript is a review of upper GI endoscopy in children. It is quite comprehensive, but there are a few comments to be made: 1) The language needs to be corrected by a native speaker. There are many mistakes concerning articles, along with some general language issues. 2) On page 5, the authors state that pH monitoring is the most specific diagnostic study. it does not state for what, I suppose GERD. In children, it is very hard to make these claims, since gastroesophageal reflux in infants is normal. There are plenty of studies stating that pH monitoring or endoscopy are not as good, even when combined with other studies such as impedance. The authors should include these studies as well. 3) In the Foreign Body Ingestion chapter, the authors use the term "contrast mail study". I have no idea what this is. It should be explained. 4) Concerning the magnets, the authors should explain that more than one magnet injected at different times (not clinging together) should be removed. 5) Table 1 should be titled "Most common indications of diagnostic UGI endoscopy". There may be others not listed here. Likewise, Table 3 should be titled "Typical indications of PEG", table 4 "Common complications of PEG"

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18902

**Title:** Efficiency of upper gastrointestinal endoscopy in pediatric surgical practice

**Reviewer's code:** 00069139

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**Science editor:** Fang-Fang Ji

**Date sent for review:** 2015-04-29 09:24

**Date reviewed:** 2015-05-10 02:00

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		[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

The manuscript depicts current practice on upper gastrointestinal endoscopy in pediatric patients. The review is comprehensive and cover nearly all aspect of UGIS in this age group. My suggestion is aimed to point at rooms for improvement; 1. A pediatric surgeon may be interested in some advanced procesures such as endoscopic biopsy of pancreatic mass, endoscopic cystogastrostomy in a pancreatic pseudocyst. If you also had some experience with this, more sharing is suggested. 2. Regarding ERCP in children, reviewing its indications and limitations (diseases that this study applied, smallest age that can be performed) may attract experienced practitioners. 3. Putting some pictures of interesting lesions, difficult procedures, etc. can make the article more colorful. 4. I made some highlights on the sentences/ words that I am not familiar with their meaning/ grammar, please consider.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18902

**Title:** Efficiency of upper gastrointestinal endoscopy in pediatric surgical practice

**Reviewer's code:** 01213502

**Reviewer's country:** Taiwan

**Science editor:** Fang-Fang Ji

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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
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<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 checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Questions: As mentioned in p4 line 15 and 19 as below: P 4. Line15 Gauriso et al. [11] reported that endoscopy is not necessitating for all children with dyspeptic symptoms. .... Line1 19 UGI endoscopy should be performed in children with intractable or unexplained abdominal pain. Multiple biopsies should be done from esophagus, stomach and duodenum during endoscopy even these areas are macroscopically normal. My questions are: ? If it is not necessary for all children with dyspeptic s/s, why should multiple biopsies necessary be done even all the areas look normal grossly? ? Which areas will the biopsies be taken (How to choose)?