



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17326

Title: Endoscopic ultrasound elastography: current status and future perspectives

Reviewer's code: 00074961

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> [] 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"/> [Y] No	<input 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 type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

-You should check the spelling: there are some mistakes. -Core tip, line 5 and last paragraph of Introduction: "chronic" instead of "chornic". -Qualitative EUS elastography, line 3: "colour" instead of "clolor". -Future Development (EUS elastography for EUS-FNA): "identify" instead of "indentify" -Conclusions, first paragraph: "combined" instead of "conbined". -Conclusions, last paragraph: "elastography" instead of "elastogrphy" and "application" instead "applicatrion". -You could divide Table 1 (it includes two different scoring systems). -Lymph nodes, Qualitative EUS elastography: I should remove "was almost perfect" when you say: "The interobserver agreement was almost perfect (kappa=0.84). -Subepithelial masses: the paragraph "More than 90 % of malignant subepithelial masses ..." is irrelevant in your work. You could delete it. -You could include some more limitations: cystic and inflammatory lesions, availability, training, more time in procedure, distinguishing among focal malignant focal pancreatic masses.