**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 73711

**Title:** Artificial intelligence in gastroenterology: A state-of-the-art review

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

**Peer-review model:** Single blind

**Reviewer’s code:** 05262253

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor

**Reviewer’s Country/Territory:** South Korea

**Author’s Country/Territory:** Denmark

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-12-01 12:16

**Reviewer performed review:** 2021-12-03 11:21

**Review time:** 1 Day and 23 Hours

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<th>[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish</th>
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<td>Conclusion</td>
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<td>Peer-reviewer</td>
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SPECIFIC COMMENTS TO AUTHORS
Thank you for the opportunity to review this letter. Although the contents of the letter were observed with interest, minor issues were identified. We agree that CCE can be considered as an alternative primary diagnostic procedure to optical colonoscopy (OC) during the Covid-19 pandemic. But cost is also an important part. In many Asian countries, OCs are less expensive than CCEs, so the role of CCEs is relatively reduced. Unlike in Asia, if CCE has better cost-effectiveness compared to OC in Europe, the role of CCE will be more emphasized if this part is added.
Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 73711

Title: Artificial intelligence in gastroenterology: A state-of-the-art review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

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Reviewer's code: 02954076

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Academic degree: MD, MRCP, MSc, PhD

Professional title: Senior Postdoctoral Fellow

Reviewer's Country/Territory: United Kingdom

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SPECIFIC COMMENTS TO AUTHORS
The authors discuss the role of AI in CCE and offer some interesting insight into the areas where it might be useful. An interesting point is the role of AI in differentiating hyperplastic and adenomatous polyps. I think the authors should mention the recent paper looking at the differential diagnosis of colorectal polyps by CCE (The Differential Diagnosis of Colorectal Polyps Using Colon Capsule Endoscopy Intern Med. 2021 Jun 15;60(12):1805-1812. doi: 10.2169/internalmedicine.6446-20. Epub 2021 Jan 15). Although there is not much literature on this, I believe that the second generation CCE offers good quality images to be able to differentiate an adenoma from a hyperplastic polyp by optical diagnosis alone (perhaps with FICE as an adjunct). More research into this would be interesting and also incorporating the role of AI in differentiating polyp types to reduce the number of onward referrals for colonoscopy. Also, the identification of sessile serrated lesions by AI would be important given their premalignant potential and difficulty to identify at CCE. The authors could mention their thoughts re. SSLs and AI-assisted identification.