



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 64871

**Title:** COVID-19 in the endoscopy unit: How likely is transmission of infection? Results from an international, multicenter study

**Reviewer's code:** 05336599

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** Greece

**Manuscript submission date:** 2021-02-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-02-27 13:38

**Reviewer performed review:** 2021-02-27 13:39

**Review time:** 1 Hour

<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 Grade E: Do not publish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>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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



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#### **SPECIFIC COMMENTS TO AUTHORS**

It's an original study. It can be accepted



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 64871

**Title:** COVID-19 in the endoscopy unit: How likely is transmission of infection? Results from an international, multicenter study

**Reviewer’s code:** 03522829

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Doctor, Lecturer

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

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

**Manuscript submission date:** 2021-02-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-03-02 17:35

**Reviewer performed review:** 2021-03-17 09:55

**Review time:** 14 Days and 16 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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



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#### **SPECIFIC COMMENTS TO AUTHORS**

This study was planned to assess the impact of COVID-19 on endoscopy during the first European lockdown (March-May 2020) in multi-center study. In general, this plan is an interesting topic and a well-written manuscript. Therefore, I recommend the publication.



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 64871

**Title:** COVID-19 in the endoscopy unit: How likely is transmission of infection? Results from an international, multicenter study

**Reviewer's code:** 05909344

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** Pakistan

**Author's Country/Territory:** Greece

**Manuscript submission date:** 2021-02-25

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2021-03-18 05:47

**Reviewer performed review:** 2021-03-27 04:35

**Review time:** 8 Days and 22 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>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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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



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#### **SPECIFIC COMMENTS TO AUTHORS**

Overall, the manuscript highlights an important aspect in the field of gastroenterology, a clinical dilemma of whether or not to perform endoscopic procedures (especially elective) during the pandemic. However, the manuscript can gain strength if the authors can also provide the indication for the procedures (i.e. elective versus emergency cases) and then compare the two groups. Also, as mentioned in the limitations section, prior testing for SARS-CoV-2 in patients on list for endoscopy would have further augmented the study results. Correction in the results section: 1267 endoscopies (instead of 126) In the discussion section, authors are labelling this study as a TRIAL (its a retrospective analysis)



### PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 64871

**Title:** COVID-19 in the endoscopy unit: How likely is transmission of infection? Results from an international, multicenter study

**Reviewer's code:** 00049578

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** Greece

**Manuscript submission date:** 2021-02-25

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2021-03-18 11:05

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<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<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 type="checkbox"/> Minor revision <input checked="" 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



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## **SPECIFIC COMMENTS TO AUTHORS**

The paper by Papanikolaou et al. presents the results of an observational study aimed to assess the risk of COVID19 contagion in the endoscopy unit under current clinical practice recommendations. It is a multicenter international study involving 1267 endoscopies. The authors found a very low infection rate and conclude that the risk is rather low. This is a valuable initiative in the current context, in principle, although it has important limitations. Some are acknowledged by the authors already. My comments are given below.

**MAJOR COMMENTS**

1. Abstract: Methods should include the multicenter design (now in Aim) and the testing protocol in patients and PEU. Also the exclusion of positive patients. It is said that 75% patients 'turned positive' - what does this mean exactly, as patients were not tested before endoscopy?
2. The interpretation of the probable contagion route is not explained. In principle this would mean that a likely alternative route of transmission has been identified, but this requires case by case details.
3. The main problem of the study in my eyes is that, given an estimated very low infection rate, little can be drawn from the positive cases detected. In other words, for some 3% of positive patients (of which we do not know whether they were infected prior to endoscopy) we get 3% positive PEU. Is this a low risk? What is the background risk in a comparable population? There are no data (or comment) about the possible contact between positive PEU and patients. Also in P10 L7 it says 22.4% of patients were 'retested', this is confusing.
4. Positive patients are excluded from analysis and results are given for 1135 patients out of 1222. This is stated clearly only in Results. These are probably symptomatic patients warranting a PCR test, but we get no information about percents here. Only in the Discussion it is said that about a fourth of patients underwent pretesting. If these patients did undergo endoscopy, why were they excluded? Also under what circumstances were patients tested a posteriori? Same for



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PEU. PCR is used in both cases but there is little else in the way of information. Further, according to the abstract data from 163 PEU were recorded – what percent is this? 5. In P12, last paragraph, the authors allude to the possible connection between upper endoscopy procedure and COVID19 contagion, this is confusing again because it there is increased risk it should be mostly patient to personnel, correct? Overall, the paper is difficult to interpret, despite the fact that it is a quite simple study. So this is one problem. Once this is solved, probably little can be known from it, which is a second problem although more understandable. MINOR COMMENTS 1. Page 6, line 10: please rephrase, perhaps something like ‘Moreover, endoscopy involves also the assisting personnel...’. 2. P8 L5: each patient 3. P9 L11: which author is the statician? 4. P9 L15: reference? 5. Probably explain abbreviations in full in the tables as well.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 64871

**Title:** COVID-19 in the endoscopy unit: How likely is transmission of infection? Results from an international, multicenter study

**Reviewer's code:** 00049578

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** Greece

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**Reviewer accepted review:** 2021-04-28 10:51

**Reviewer performed review:** 2021-04-30 08:53

**Review time:** 1 Day and 22 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>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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>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



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It would be a lot better if changes were indicated in some way in the manuscript. I am not sure whether this is required by the journal but it is much easier to assess the edited manuscript this way. The lines given by the authors do not match, which does not help.

1. OK. 2. Right. Then wouldn't it be preferable to say nothing at all? See also below. 3. This comment by the authors sums up the problem with this paper, which is the presentation. I fully agree with the first part of this paragraph: this is the value of the study. But it is not clear enough, as the manuscript goes beyond that to hint at possible contagions and so forth. Regarding the second part, the design is simple, yet it is confusing to the reader. Let's see: out of 1135 patients not positive (untested or tested negative), 254 were found to be positive a posteriori, that's the 22.4%. But if you say they were retested you imply that only pre-tested patients were tested a posteriori. This makes no sense to me, although I reckon it is possible. According to this, there was no COVID19 test performed after endoscopy to any patients that were not tested prior to it. That is some coincidence! Thus I am guessing that it is either that or there is an error in the presentation. It could be that the percentage of untested patients was very low, but this is not the case according to the Discussion. Either way, this should be clearer. A diagram would help (I actually drew one myself so as not to get lost). 4. It makes sense to focus on nonpositive patients for those reasons, but actually the risk of infection would be best assessed in this population, would it not? As for PEU, simply say 'all 163 PEU'. Again, clarity. 5. I fully agree.