Reviewer’s report

Title: Clinical impact of the perioperative management of oral anticoagulants in bleeding after colonic endoscopic mucosal resection

Version: 0 Date: 03 Aug 2019

Reviewer: Yosuke Tsuji

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In the present study, authors investigated the post-EMR bleeding rate, especially focusing on the patients taking antithrombotic agents. Heparin bridge therapy (HBT) has recently reported to be a high risk for post-EMR bleeding, and so the perioperative management of antithrombotic agents without HBT has been considered to be better. In this study, cases with continuous use of warfarin or one-day skip of DOACs are included, so in this regard this study is quite informative.

Major comments:

1. The aim of this study might be elucidating the perioperative management of anticoagulants without HBT. Then, in order to investigate it, it is more appropriate to compare anticoagulants takers with HBT and those without HBT (continuous warfarin or one-day skip of DOACs). However, because of a small sample size, authors could not demonstrate a significant difference in post-EMR bleeding rate between those two groups and they compared a control group not taking antithrombotic agents with the other groups. This is an unignorable limitation.

2. In Tables 3 and 4, it is difficult to know whether risk-per-polyp or risk-per-patient is treated. For example, Table 3 shows the number of HBT group is 31, but Table 4 showed 32. Please add an explanation.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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I am able to assess the statistics

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