

## PEER-REVIEW REPORT

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

**Manuscript NO:** 32920

**Title:** How I Do It. Pancreas preserving distal duodenectomy: a versatile operation for a range of infra-papillary pathologies

**Reviewer's code:** 03647581

**Reviewer's country:** Italy

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-03

**Date reviewed:** 2017-02-03

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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" 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		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

The authors describe a valid procedure to avoid pancreaticoduodenectomy in case of duodenal lesion arising distally to the major papilla. The paper is well written and the technique is clearly described. However, it is not new, and the paper does not add any evidence to the existing literature. Moreover, my major concern regards the indication for partial duodenectomy. I'm ok with duodenal GIST or endoscopically unresectable polyps but I'm not sure about its value in oncological terms. It could be more interesting if the author reported precise oncological outcome of their patients, in particular the pattern of recurrence (local, nodal, distant?). The only new evidence could be the assessment of oncological reliability of partial duodenectomy in case of cancer of the distal part of duodenum.

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

**Manuscript NO:** 32920

**Title:** How I Do It. Pancreas preserving distal duodenectomy: a versatile operation for a range of infra-papillary pathologies

**Reviewer's code:** 03647159

**Reviewer's country:** United States

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-03

**Date reviewed:** 2017-02-05

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

## COMMENTS TO AUTHORS

This is a case-series of pancreatic preserving distal duodenectomy (PPDD) for a distal duodenum lesion. This is a very well written manuscript, however, it does not contain new findings as this procedure has been widely accepted already (authors mentioned that there are already multiple case-series/case reports published). There are a few questions that I would like authors to clarify for readers. 1. When authors performed PPDD for malignancies, such as duodenal adenocarcinoma or colonic cancer direct invasion, what is the margin status? If authors can provide margin distance and the relation with the local recurrence etc, this information would strengthen this manuscript more. 2. It would be helpful to add an algorithm regarding of when to consider other procedures such as PD, Pancreas preserving total duodenectomy, bypass vs. PPDD etc.

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

**Manuscript NO:** 32920

**Title:** How I Do It. Pancreas preserving distal duodenectomy: a versatile operation for a range of infra-papillary pathologies

**Reviewer's code:** 02822869

**Reviewer's country:** Switzerland

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-03

**Date reviewed:** 2017-02-13

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

This is a retrospective single-center series of 19 patients who underwent pancreas preserving distal duodenectomy during a 13-years period. The described technique is already known, and therefore, from a technical point of view, this paper does not add novel information or contribute to a change of surgical practice. As the operative indication is rare, a potpourri of indications have been used. While benign lesions may represent a good indication, there remain some doubts whether duodenal cancer is suitable for this technique. The postoperative complication rate, i.e. anastomotic fistula and pancreatic fistula almost never occurred. In this context, the technical aspects need further description (e.g. use of drains, somatostatin). Statistics should be mentioned in the method section, ERAS did not exist in the early 2000. There are too many figures.

## PEER-REVIEW REPORT

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

**Manuscript NO:** 32920

**Title:** How I Do It. Pancreas preserving distal duodenectomy: a versatile operation for a range of infra-papillary pathologies

**Reviewer's code:** 03262140

**Reviewer's country:** Japan

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-03

**Date reviewed:** 2017-02-15

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 checked="" 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
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<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Pancreas preserving distal duodenectomy: a versatile operation for a range of infra-papillary pathologies Thank you for opportunity to review this well-written paper. The authors described surgical technique and its results of pancreas preserving distal duodenectomy. Although there are no new findings, I have some questions. Major 1. Authors should clearly present the criteria for distal duodenectomy. How long centimeter between tumor and papilla vater is indication for PPDD procedure. Why they did not examine the upper GI series? 2. How did you check lymph node metastasis intraoperatively for malignancy? Do you have sentinel node navigation system? How do you think sentinel node navigation for PPDD in malignancy? Authors should discuss this point for introduce the minimally invasive surgery for malignancy. Minor Authors should mention in laparoscopic surgery. I think this procedure is better indication for low grade malignancy and benign tumor. Laparoscopic procedure is much better than open PPDD for low grade malignancy and benign tumor.