

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 40983

Title: Self-expandable metal stents in patients with postoperative delayed gastric emptying after distal gastrectomy

Reviewer's code: 03506087

Reviewer's country: China

Science editor: Ruo-Yu Ma

Date sent for review: 2018-07-19

Date reviewed: 2018-08-08

Review time: 20 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Kim et al. reported their experience in utilization of self-expandable metal stent on treatment of postoperative DGE. Generally, this is an interesting study, which provided a new modality for treatment of DGE. There are several issues concerned about this



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study. 1. Where did the stent was placed, at the anastomotic site? 2. DGE is generally recognized as a gastrokinetic disease, which is associated with nerve damage, altered hormonal levels, and intra-abdominal infection, but not mechanical obstruction. How did the author think a stent can improve the symptoms? The mechanism should be proposed! 3. The 20 patients included had experienced distal gastrectomy for gastric carcinoma. How do the authors think this method can work on patients undergoing pancreaticoduodenectomy?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 40983

Title: Self-expandable metal stents in patients with postoperative delayed gastric emptying after distal gastrectomy

Reviewer's code: 03998130

Reviewer's country: Romania

Science editor: Ruo-Yu Ma

Date sent for review: 2018-08-13

Date reviewed: 2018-08-13

Review time: 13 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

An interesting method addressing an unpleasant complication after distal gastrectomy. Useful for clinical practice. However, some concerns should be raised: Please consider to change the title in Self-Expandable Metal Stents in Patients with Postoperative Delayed



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Gastric Emptying after Distal Gastrectomy. Please provide the total number of distal gastrectomies performed during the same period to find the percentage of patients with DGE and the percentage of patients who required stent placement for intractable DGE. How many patients with Billroth I reconstruction developed DGE/ intractable DGE? How many patients with Billroth II reconstruction developed DGE/ intractable DGE? Are there any significant differences between groups? Please provide the required data. Please define more clearly what patients with DGE were considered for stent placement. What is intractable DGE? What kind of conservative management was previously performed in these patients? How many days of conservative treatment were considered prior to settle the need for stents? Please provide the point of the last follow-up. Otherwise how the mean follow-up time was calculated? Please provide number of patients but also percentages in brackets in all situations (i.e., 15 of 20 patients (75%)). The Discussion part repeats some paragraphs from Introduction. Please remove the duplicates. Furthermore, the Discussion part paragraphs have no cited references except one, which is very uncommon for this part of the manuscript. Please insert more citations in these paragraphs. Nevertheless, please state more clearly when you recommend the stents for DGE after distal gastrectomy.

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Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

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[Y] No