# PEER-REVIEW REPORT

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

**Manuscript NO:** 41736

**Title:** Learning curves in minimally invasive esophagectomy

**Reviewer's code:** 00058358

**Reviewer's country:** Australia

**Science editor:** Ruo-Yu Ma

**Date sent for review:** 2018-08-27

**Date reviewed:** 2018-09-07

**Review time:** 11 Days

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| [  ] Grade E: Do not publish | | [  ] Rejection | [ Y] Advanced |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

## SPECIFIC COMMENTS TO AUTHORS

This is a well written paper, and I do not think it requires any modification. Well done. I

enjoyed reading this, and agree with the conclusions

## INITIAL REVIEW OF THE MANUSCRIPT

*Google Search:*

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[ Y ] No


*BPG Search:*

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[ Y ] No

# PEER-REVIEW REPORT

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

**Manuscript NO:** 41736

**Title:** Learning curves in minimally invasive esophagectomy

**Reviewer's code:** 03855233

**Reviewer's country:** China

**Science editor:** Ruo-Yu Ma

**Date sent for review:** 2018-09-17

**Date reviewed:** 2018-09-30

**Review time:** 13 Days

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| [ ] Grade E: Do not publish | | [ ] Rejection | [ ] Advanced |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

## SPECIFIC COMMENTS TO AUTHORS

This review disclosed a neglected fact that innovation is not free. The learning associated morbidity cannot be avoided but can be decreased via safe implementation during developing a new intervention of MIE, I agree the author's opinion, but I suppose this article will be better if elaborating more detailed.   1. The MIE can be performed via

various approaches, including McKeown, Ivor Lewis and transhiatal approach. The complexity of each procedure is different, and might associate with a unique learning curve. I don't know if any study comparing each of these learning associated comorbidities? 2. Surgeons in high-volume hospitals may be more experienced in coping with operative accidents. Can this be helpful to decrease the learning associated comorbidities? 3. Totally MIE is technically demanding. As an intermediate or transition from open esophagectomy to totally MIE, hybrid MIE (one stage of the procedure was open and the other stage laparoscopic or thoracoscopic) is widely used in some center. Does hybrid MIE is beneficial to shorten learning curve for implementation of totally MIE? 4. As for complex surgery like MIE, skills simulator or surgery in the organ of experiment animal can be implemented for training. Do these methods affect outcome parameters during the early phase of experience? If so, are there any evidences?

## INITIAL REVIEW OF THE MANUSCRIPT

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[   ] Plagiarism

[ Y ] No


*BPG Search:*

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[ Y ] No