



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 41994

Title: Body mass index vs short-term impacts after laparoscopy gastrectomy in Asian patients: A meta-analysis

Reviewer's code: 02997214

Reviewer's country: Turkey

Science editor: Fang-Fang Ji

Date sent for review: 2018-09-12

Date reviewed: 2018-09-18

Review time: 6 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 checked="" type="checkbox"/> Advanced
		<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

Comments 1- Material and Methods are not well-organized. It is very difficult to understand flow chart. 2- Which cases were included for laparoscopy gastrectomy? Why total gastrectomy cases and early stage gastric carcinoma cases were not included in



**Baishideng
Publishing
Group**

7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242
Fax: +1-925-223-8243
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

their study. Did only Subtotal, distal or wedge resection cases include? These points should be carefully evaluated and explained in Material and Methods section.

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 Clinical Cases

Manuscript NO: 41994

Title: Body mass index vs short-term impacts after laparoscopy gastrectomy in Asian patients: A meta-analysis

Reviewer’s code: 02553318

Reviewer’s country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2018-09-18

Date reviewed: 2018-09-28

Review time: 10 Days

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 Grade E: Do not publish	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

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, first let me congratulate with you for your study. The meta-analysis, that you carried out, is methodologically well conducted; English and statistics are more than good. However, prior publication, I would suggest to clarify the two categories



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https://www.wjgnet.com

"reoperation" and "intervention" in which you divided procedures performed within 30 days from LG. Why is "cholecystectomy" a reoperation and "percutaneous drain" an "intervention" Wouldn't be easier and more appropriate to consider all procedures performed due to a postop complication as a "reoperation"? please explain this or revise categories to receive my approval for publication.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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- No

BPG Search:

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- Duplicate publication
- Plagiarism
- No