



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 46409

Title: Conduit necrosis following esophagectomy: An up-to-date literature review

Reviewer's code: 02553318

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-14 14:08

Reviewer performed review: 2019-02-19 08:43

Review time: 4 Days and 18 Hours

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 type="checkbox"/> Grade B: Very good	<input 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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" 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

Dear Authors, although I have appreciated your article, there are some correction I would suggest before publication. 1- As stated into the text, you have performed this review according to the PRISMA statement. Please provide a PRISMA CHECKLIST 2- Some parts of your manuscript need to be rearranged. In my opinion in the methods, the



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objectives of this study are not clearly presented. Indeed, a "RESULTS" paragraph is missing. Which was the original reason for this review? to describe incidence, morbidity and mortality of necrosis of conduit? In this case you should report rates of these outcomes into the results' section and move other paragraphs ("Definition", "clinical manifestation", "Diagnosis") into the introduction or into the discussion.

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 Gastrointestinal Surgery

Manuscript NO: 46409

Title: Conduit necrosis following esophagectomy: An up-to-date literature review

Reviewer's code: 02887553

Reviewer's country: Turkey

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-15 06:22

Reviewer performed review: 2019-02-19 21:59

Review time: 4 Days and 15 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 checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input 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

Dear Authors, This is a review that is investigating the conduit necrosis following esophagectomy. The manuscript is well structured; concepts are clear and actual and it is well referenced. I think this topic would be of interest for WJGS readers particularly for esophagogastric surgeons. I have some minor comments. 1. Generally, the manuscript is



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good written. However, for fluent language, the manuscript should be edited by medical manuscript edition service such as www.textcheck.com. The Authors should preferred American English in all sections. So, Oesophagus >>> Esophagus, MIO, etc.. 2. The Abbreviations should be controlled. ICU, PRISMA (Preferred Reporting Items for Systematic reviews and Meta-Analyses), CT, etc. And also in the Tables; ECG, ICG, etc. 3. The Abstract should be re-written. Because it has general knowledge, not summary information. 4. For main complication of the esophageal replacement, intrathoracic stomach, delayed gastric emptying, etc should be mentioned. 5. In Risk Factor, Is "thoracic epidural" "thoracic epidural analgesia? or what? No other comment. This is a good review. So, the manuscript should be published in World Journal of Gastrointestinal Surgery after minor revision. Best regards.

INITIAL REVIEW OF THE MANUSCRIPT

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BPG Search:

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- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 46409

Title: Conduit necrosis following esophagectomy: An up-to-date literature review

Reviewer's code: 03755443

Reviewer's country: Brazil

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-14 01:49

Reviewer performed review: 2019-02-25 07:36

Review time: 11 Days and 5 Hours

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	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input checked="" 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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" 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

There are two main sites of esophageal reconstruction: in the chest and in the neck. Thus, different literature studies cited by this manuscript evaluate different sites of esophageal reconstruction (in the neck and in the chest). Therefore, every sentence that references each of the studies cited should mention what kind of reconstruction: neck



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reconstruction and chest reconstruction throughout the manuscript. Please revise the entire manuscript performing the revisions suggested above. Grammar revisions should be done in the first paragraph of the item Epidemiology and in the first paragraph of Clinical manifestations.

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BPG Search:

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- [Y] No