

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 58303

Title: Clinical efficacy of integral theory-guided laparoscopic integral pelvic floor/ligament repair in the treatment of internal rectal prolapse in females

Reviewer's code: 00503176

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Croatia

Author's Country/Territory: China

Manuscript submission date: 2020-07-20

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-08-25 13:25

Reviewer performed review: 2020-08-25 14:03

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

My knowledge on the topic addressed is only general - hence my comments are related only to some of the methodological aspects. In this respect I have to briefly summarize the (methodological) essence so that the comments are then perceived in an adequate way. This is an observational study. During a certain period of time, one method was used. Then, a method was improved and subsequently, all patients underwent the new method (surgical procedure). So, it is a non-randomized comparison. It evaluated outcomes after 6 months, 2 years and 5 years post-surgery. Even in a randomized trial, after elapse of such a long time - many things happen with patients that may influence the outcome (ie., post-baseline covariates or confounders) - these are difficult to account for, even in a RCT, yet alone in an observational study. Often, authors burden studies with many statistical tests - typically - too many. But statistical tests and p-values cannot "fix" some things related to design. In this paper, there are by far too many statistical tests that actually do not mean much. Also, Figures 1-4 and then tables 2 and 3 show more or less the same thing. My specific (minor) comments are: 1. The authors should report for both group A and group B -how many patients were initially considered for inclusion (to result in the enrolled number of subjects). 2. One table (like the current Table 1) - should show the baseline data. This is ok. 3. One Figure, e.g., Figure 1 (A-D) should show the 4 scores over time like mean(SD) or similar - just the RAW data (pre-op, and then at post-op times. Under each time point, the number of considered subjects should be given). 4. ANOVA is more or less an appropriate approach. A better one would be a general linear mixed model (it will not "delete" subjects who did not complete all time-points - but will use all data available at each point). The outcome should be "change vs. pre-op score" - adjusted for covariates of at least AGE and BASELINE score. 5. I would restrict the analysis at 2 years. The drop-out and post-baseline events that might have influenced the outcome at 5 years



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

are progressively many - and are not taken into account. So, I would simply have, for each score (difference vs. baseline), a following model: fixed factors: treatment, baseline score, age, time (6 months and 2 years) and time*treatment interaction. the result would be a) overall difference between surgeries and b) differences at 6 mo and 2 years (adjusted for multiple comparisons). No other comparisons and tests. Data for 5 year could be reported as descriptive only - statistical tests do not make much sense...when the design is such that the outcomes are most likely confounded by many unmeasured covariates. 6. The Discussion should address this point - a) non-randomized setting, b) not accounting for potential post-baseline covariates. The interpretation of the results, should, consequently be - that data are "strongly suggestive" for a superiority of the improved technique - and that a randomized trial with blinded patients and assessors is warranted to confirm this suggestion.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 58303

Title: Clinical efficacy of integral theory-guided laparoscopic integral pelvic floor/ligament repair in the treatment of internal rectal prolapse in females

Reviewer's code: 05112530

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2020-07-20

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-08-26 05:09

Reviewer performed review: 2020-08-31 12:30

Review time: 5 Days and 7 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
<https://www.wjgnet.com>

SPECIFIC COMMENTS TO AUTHORS

Despite the large number of patients in the main and control groups, the study is retrospective and not randomized, which reduces the level of evidence of the study results. It is recommended in the future to conduct a randomized, and possibly a multicenter study to obtain more reliable results. The authors' conclusions are logical and consistently proved by them in the reviewed article. Given the high level of research, the article is recommended for publication.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 58303

Title: Clinical efficacy of integral theory-guided laparoscopic integral pelvic floor/ligament repair in the treatment of internal rectal prolapse in females

Reviewer's code: 02861252

Position: Editorial Board

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2020-07-20

Reviewer chosen by: Jia-Ping Yan

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Reviewer performed review: 2020-09-02 14:33

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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SPECIFIC COMMENTS TO AUTHORS

Good work indeed...