

PEER-REVIEW REPORT

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Manuscript NO: 58901

Title: Perianal fistulodesis - A pilot study of a novel minimally invasive surgical and medical approach for closure of perianal fistulae

Reviewer's code: 04093311

Position: Peer Reviewer

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Switzerland

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Reviewer chosen by: AI Technique

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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 Grade E: Do not publish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



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SPECIFIC COMMENTS TO AUTHORS

In this prospective study, the authors sought to determine the efficacy of a new treatment of perianal fistula disease for which they term “fistulodesis”, which involved curettage of the fistula tract, flushing the tract with acetylcysteine and doxycycline, suture of the inner fistula opening, fibrin glue instillation, and closure of the outer fistula opening. Both Crohn’s disease and non-Crohn’s disease patients were included. Patients were followed for at least 24 weeks. Unfortunately, the procedure was successful in only 30% of patients. There was a trend towards improvement in Crohn’s disease patients, but sample size is limited. Although the findings of the study do not support the routine use of “fistulodesis”, I applaud the authors in trying to solve this difficult to manage problem for both the patient and the surgeon. Both positive and negative studies should be reported in the literature to allow evidence-based surgery. Overall, the study was well designed and the manuscript is well written. The authors comment on the limitations of the study including a small sample size. I think it would be informative to address the following issues: 1. What prior fistula surgeries were performed? Were they setons only? LIFT? Flap? 2. Of the patients that failed, did they go on to have additional surgeries? If so, did they heal? 3. It would be of value to include discussion in discussion section prior literature regarding the use of using acetylcysteine and doxycycline (or lack thereof). 4. Comment which type of suture was used to close the internal and external openings during the procedure. 5. Include all p-values in the tables even if not significant.