



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 61556

Title: Risk factors for postoperative delayed gastric emptying in ovarian cancer treated with cytoreductive surgery and hyperthermic intraperitoneal chemotherapy

Reviewer's code: 02974589

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Sweden

Author's Country/Territory: China

Manuscript submission date: 2020-12-22

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-01-13 14:52

Reviewer performed review: 2021-01-13 15:29

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 Grade E: Do not publish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



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SPECIFIC COMMENTS TO AUTHORS

Well done with this article. It is straight forward and risk factors for delayed gastric emptying are important to define. Most importantly is finding a way to improve this aspect of the postoperative recovery. This is not evaluated in this study. Some comments:

1: Some important factors are not considered: 1a: PCI - no peritoneal cancer index is given to evaluate the extent of disease. Please add this information. If it does not exist. Do you use any other method of measuring tumor burden in the abdomen? Gillys score? Holland 7 region score etc? 1b: Perigastric and gastric dissection is known to be a the largest risk faktor, but this is not really evaluated here. Please add a perigastric/gastric dissection group in the univariate/multivariate analysis. This could include gastrectomy, pankreatectomy, spenectomi, left total diafragmatic peritonectomy. 2: Omentectomy is not described. Please describe if this was performed on everyone. And if it was, please comment on whether the gastroepiploic artery was saved or if it was transected. 3: There has been som discussion concerning leaving or not leaving the gastroepiploic artery during omentectomy. This may something worth referencing depending on how you do your omentectomies. 4: Lastly, the definition of delayed gastric emptying is weak. There is a known problem with long-term nausea postoperatively after CRS+HIPEC. The definition in this article risks including patient with chemotherapy related long-term nausea. Please comment on this risk. Prehaps also include some more information concerning your postoperative recovery plan. How much antiemetics are used postoperatively. What anti-emetics are used? Do you use cortison postop for nausea treatment? Do you have motility drugs included postop? Some more information here would be good. Perhaps, a paragraph discussing the problem of distinguishing between DGE and nausea from other causes.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

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Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Sweden

Author's Country/Territory: China

Manuscript submission date: 2020-12-22

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2021-01-29 07:14

Reviewer performed review: 2021-01-29 07:19

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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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



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The authors have satisfactorily answered my reviewer questions. No further comments.