

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 61572

Title: Meta-analysis and trial sequential analysis of randomized evidence comparing general anesthesia versus regional anesthesia for laparoscopic cholecystectomy

Reviewer's code: 02552429

Position: Peer Reviewer

Academic degree: FACS, MD, PhD

Professional title: Professor

Reviewer's Country/Territory: France

Author's Country/Territory: United Kingdom

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Reviewer chosen by: Jin-Lei Wang

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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 Grade E: Do not publish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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

I have reviewed the paper entitled "General anesthesia versus regional anesthesia for laparoscopic cholecystectomy: A systematic review, meta-analysis, and trial sequential analysis of randomized controlled trials". The paper is an interesting and well-conducted meta-analysis on the topic of regional anaesthesia for cholecystectomy. The presentation of the meta-analysis and the conclusion respects the principles for this type of paper. The conclusion also corresponds to the analysis. There is no significant change to make to the analysis. The main criticism of this paper relates to the value and the level of the publications considered to realise this meta-analysis. In fact, they are of real poor value with a very low impact factor. We can take as an example the study in reference n°14, Kalaivani et al., in which patients are excluded of the study in case of failure of the regional anaesthetic. This study does not follow the principle of 'intent to treat' and consequently the results give significant potential additional value to regional anaesthesia considering this bias. Furthermore, in this study, the mean OP time is at least 80-97 mins to perform laparoscopic cholecystectomy... Overall, this represents the main weakness of the paper, and the issue should be addressed in the discussion and in the conclusion.