

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 69810

**Title:** Perforating and nonperforating indications in repeated surgeries for Crohn's disease

**Provenance and peer review:** Unsolicited manuscript; externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03727521

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** Brazil

**Author's Country/Territory:** China

**Manuscript submission date:** 2021-07-12

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-13 11:36

**Reviewer performed review:** 2021-07-15 11:25

**Review time:** 1 Day and 23 Hours

|                    |   |
|--------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| Language quality   | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><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)<br><input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| Re-review          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |

|                                     |   |
|-------------------------------------|---|
| <b>Peer-reviewer<br/>statements</b> | 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

It is a retrospective study. The aim was to analyze the perforating and nonperforating indications for Crohn's disease (CD) of repeated operations and identify the anastomotic stoma characteristics for postoperative CD. The authors reviewed 386 patients who underwent at least one resection for CD between 2003 and 2013. Univariate and multivariate analyses were performed to determine risk factors for recurrence. The indication for reoperation in CD tends to be the same as the primary operation, i.e., perforating disease tends to re-present as perforating disease, and nonperforating as nonperforating. Presence of perforating CD was a predictor of recurrence for both the first and second surgery. Anastomotic lesions were the most common sites of recurrence after operation. It is an interesting study, but some questions should be answered: - The title is "Anastomotic stoma characteristics in repeated surgeries for Crohn's disease", but the main aim of the study was to compare the clinical characteristics between the first, second and third surgeries, and to analyze correlations of the perforating and nonperforating indications. Besides that, the authors described the anastomotic lesions such as the recurrence of the disease and not necessary all anastomoses are stomas. I suggest a revision of the title. By my understanding, an anastomotic stoma occurs when the surgeon brings the proximal and distal loop together and proceed to the anastomosis of the posterior wall. The anterior wall of the anastomosis remains open and is then fixed to the abdominal wall as a stoma. Please define anastomotic stoma that was considered in the article. Besides that, the authors cited in the title the term "repeated surgeries", but the authors considered all CD patients who had undergone at least one surgical resection for CD. So, the patients not necessary presented repeated

surgeries for CD to be included in the study. - All references are older than 10 years. Since the authors cited the epidemiology and rates of IBD surgery and reoperation rates, I suggest updating the data with more recent references, as rates of surgery likely changed after the advent of biological therapy. - Please state the novelty of the study or the contributions to the literature in the end of the Introduction section. - Table 1 shows a low number of patients using biological therapy, even before the second or third surgery. If we consider that the need for intestinal resection is one of the main risk factors for recurrence and the need for a new resection, it is estimated that the number of patients using biological therapy would be greater after the first surgery, which was not observed. One bias of this analysis is the fact that we do not have data of the patients who underwent the first surgery but did not undergo the second surgery, perhaps due to the greater frequency of use of drugs that change the natural history of the disease, such as the biological therapy. - I suggest to the authors to discuss more the risk factors to recurrence in the Discussion section. There is a lack of discussion about drugs in the prevention of recurrence, such the use of biological therapy. - How is the drug treatment of patients who need a resection surgery for CD? Do patients use immunomodulators? Biological therapy? How much time do you repeat colonoscopy after surgery? What protocol do you follow in your country? These are important aspects that influence the recurrence of the disease in the postoperative period and were not mentioned in the text - Besides that, I suggest not repeating the results of the study in the discussion section.

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**Peer-review model:** Single blind

**Reviewer's code:** 05328704

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** China

**Manuscript submission date:** 2021-07-12

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-12-06 10:00

**Reviewer performed review:** 2021-12-13 02:30

**Review time:** 6 Days and 16 Hours

|                    |   |
|--------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| Language quality   | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><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)<br><input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| Re-review          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |



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**Peer-reviewer  
statements**

Peer-Review: ☒ Anonymous ☐ Onymous

Conflicts-of-Interest: ☐ Yes ☒ No

#### **SPECIFIC COMMENTS TO AUTHORS**

This is an interesting study about the anastomotic stoma characteristics in repeated surgeries for Crohn's disease. This study is very interesting, and well designed. A minor editing is required.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Academic degree:** PhD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** Brazil

**Author's Country/Territory:** China

**Manuscript submission date:** 2021-07-12

**Reviewer chosen by:** Ji-Hong Liu

**Reviewer accepted review:** 2021-12-29 12:23

**Reviewer performed review:** 2021-12-29 12:44

**Review time:** 1 Hour

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|---------------------------|---|
| <b>Scientific quality</b> | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| <b>Language quality</b>   | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>         | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority)<br><input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| <b>Peer-reviewer</b>      | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous   |



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

## **SPECIFIC COMMENTS TO AUTHORS**

The authors made the modifications as suggested by the reviewers.