



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 74991

**Title:** Network meta-analysis of randomized controlled trials on esophagectomies in the case of esophageal cancer: The superiority of minimally invasive surgery

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 01588784

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Surgeon

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

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

**Manuscript submission date:** 2022-01-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-18 00:38

**Reviewer performed review:** 2022-01-26 11:51

**Review time:** 8 Days and 11 Hours

<b>Scientific quality</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input 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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



<b>Peer-reviewer 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
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### **SPECIFIC COMMENTS TO AUTHORS**

The authors conducted a network meta-analysis to assess the superiority of minimally invasive esophagectomy over transthoracic, transhiatal, hybrid or robot-assisted surgery. They found that minimally invasive technique significantly reduced the incidence of pulmonary infection, whereas non-open surgery (thoracoscopic, hybrid, and robot-assisted) required longer operative time. They did not find any significant difference in survival, total adverse events, cardiac adverse events, anastomotic leakage, atrial fibrillation, wound infection, total pulmonary adverse events, vocal cord paralysis, or length of hospital stay and blood loss. They concluded that minimally invasive esophagectomy is only beneficial considering the decreased rate of pulmonary infection, and thus more trials and systematic analyses are needed for further assessment. This paper is well written, along with the sophisticated methodology using a novel network meta-analysis and well visualized figures. The manuscript is also well structured with sufficient presentations of the results. The strengths and weaknesses are adequately described in the discussion. The authors may consider the followings for minor points: 1. "Survival" means cancer-specific or overall?? Please define clearly in the manuscript. 2. Title "superiority of thoracoscopic": to be more consistent with the manuscript contents, "superiority of minimally invasive technique (or surgery)" may be considered as an alternative title.



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**Peer-review model:** Single blind

**Reviewer's code:** 05914859

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Lecturer

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

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

**Manuscript submission date:** 2022-01-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-11 19:44

**Reviewer performed review:** 2022-02-21 09:10

**Review time:** 9 Days and 13 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <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) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer 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
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**SPECIFIC COMMENTS TO AUTHORS**

It would have been probably of interest to include few more studies in the analysis since those allready included have a number of weak points.



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**Peer-review model:** Single blind

**Reviewer’s code:** 05774529

**Position:** Editorial Board

**Academic degree:** FASCRS, MD, PhD

**Professional title:** Deputy Director

**Reviewer’s Country/Territory:** China

**Author’s Country/Territory:** Hungary

**Manuscript submission date:** 2022-01-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-15 07:22

**Reviewer performed review:** 2022-02-27 01:44

**Review time:** 11 Days and 18 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer 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
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### **SPECIFIC COMMENTS TO AUTHORS**

The manuscript is a network meta-analysis of randomized controlled trials on esophagectomies in esophageal cancer. The topic is relevant, however, there are several questions that needs attention. 1. In the cover letter, “We believe, that our work will have a significant impact on clinical practice and a peer-reviewed high quality journal, like The Journal of Gastorintestinal Surgery is the perfect platform to present our results.”. “Journal of Gastorintestinal Surgery” is wrong. 2. What was the rationale behind only include articles until 2019? 3. Some content fonts have inconsistent formats and should be changed.