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Manuscript No: 83314

Name of Journal: *World Journal of Gastrointestinal Surgery*

Manuscript Type: Invited Manuscript - Minireview

Title: Surgical complications of oncological treatments. A narrative review.

Dear Editor,

Thank you for the opportunity to respond to your emailed message. We have read the comments of the two referees with interest. The manuscript has been reviewed considering the comments in your letter.

In addition, the technical corrections requested have been carried out.

We have responded point by point to the suggestions of reviewers and this is shown below.

Where we feel a change would improve the manuscript, this has been done and the change is highlighted in the text.

Please do not hesitate to get in contact if I can be of further assistance

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: 1. the patients in the data are patients on oncological treatments. Is it safe to do surgery considering the risk of bleeding and infection is higher than normal people? If you have to take action, can the patients continue the oncological treatment again? 2. maybe in the conclusion can be given data on what gastrointestinal complications are most likely to occur, based on the presentation of the emergence of cases.

My co-authors and I thank the reviewer for the appreciation of our manuscript.

The figures show clinical cases that we have treated at our hospital. The legend of the figures has been changed. the age of the patients observed and above all the neoplasm for which they were undergoing chemotherapy treatment were included.

Patients receiving chemotherapy who develop a complication that can be treated surgically have a higher risk of bleeding and infection than other patients. In case of surgery, chemotherapy treatment is suspended.

Data on the most likely gastrointestinal complications to occur, as requested by the reviewer, were included in the conclusions section.

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Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: Reviewer's results on the article of 83314 submitted to World Journal of Surgical Oncology Major Comments This is the article of mini-review of complications of surgical gastro-intestinal tracts after chemotherapies. The authors summarized five categories as the follows: enteritis, pneumatosis intestinalis, bleeding, and others including cholecystitis and second cancers. However, non-obstructive mesenteric obstruction (NOMI) must be included because it has been reported (Ref: Three cases of non-occlusive mesenteric ischemia that developed after head and neck cancer therapy. Nagano H, Fujiwara Y, Matsuzaki H, Umakoshi M, Ohori J, Kurono Y. *Auris Nasus Larynx*. 2021 Dec;48(6):1193-1198. doi: 10.1016/j.anl.2020.07.003.). In addition, these results could be summarized in tables for readers' easily understandings. If the abovementioned comments are added, this article could be accepted after re-reviewing. Minor comments 1. The line numbers could be added for suggestions for corrections. 2. The age and clinical diagnoses might be added to understand for readers as the side effects of chemotherapies.

My co-authors and I thank the reviewer for the timely and accurate comments.

We included non-occlusive mesenteric ischemia among the complications. In fact, in the first draft of the manuscript this complication was not mentioned as it is a non-surgical condition. Our mini review is in fact focused on the surgical complications of radio and chemotherapy treatments. In fact, non-occlusive mesenteric ischemia is a condition that does not always lead to the appearance of severe intestinal ischemia with necrosis of the intestinal segment and perforation.

My co-authors and I decided not to include tables. It would be a repetitive list of complications linked to the use of chemotherapy which, in our opinion, would distract the reader from an easier reading of the text of the mini review.

Regarding the comment on the line numbers, my co-authors and I prepared the manuscript taking into consideration the indications of the journal.

Age and oncological pathology have been included in the legend of the figures. The figures show clinical cases that my co-authors and I diagnosed and treated at our hospital.

(1) Science editor:

The manuscript has been peer-reviewed, and it's ready for the first decision.

Language Quality: Grade C (A great deal of language polishing)

Scientific Quality: Grade C (Good)

The manuscript was proofread by Dr. Neill J Adams, a native English speaker. The manuscript was written in English by Dr. Valentina Bianchi who worked for several years in London at a prestigious hospital. For this reason, my co-authors and I did not submit the manuscript to an external proofreading service.

(2) Company editor-in-chief:

I recommend transfer to World Journal of Gastrointestinal Surgery. I have reviewed the Peer-Review Report and the full text of the manuscript, all of which have met the basic publishing requirements of the World Journal of Gastrointestinal Surgery, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. The quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>. Uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

My co-authors and I reviewed and prepared the manuscript taking into consideration the reviewers' comments. The technical changes have all been carried out. The figures are all in one PowerPoint file. The wording relating to Copyright has been inserted on each figure, as suggested.

The manuscript was proofread by Dr. Neill J Adams, a native English speaker. The manuscript was written in English by Dr. Valentina Bianchi who worked for several years in London at a prestigious hospital. For this reason, my co-authors and I did not submit the manuscript to an external proofreading service.

My co-authors and I declare that we participated in the design, execution, and analysis of the paper and that we have seen and approved the final version. We also declare that we have no conflict of interest in connection with this paper, other than any noted in the covering letter to the editor. All the authors and all individuals mentioned in this paper agree with the contents of this manuscript or the contents that are specifically attributed to them.

None of the authors of the study have had or have at the present time any conflict of interest with this study. Moreover, none of the authors of the study have received subsidies from Public Bodies or from any other sources for the execution of this study.

My co-authors and I declare that none of the material in this manuscript has been published previously and none is currently under consideration for publication elsewhere. This includes symposia, proceedings, transactions, books, articles published by invitation, and preliminary publications of any kind. We also declare that the research reported in the paper was undertaken in compliance with the Helsinki Declaration and the International Principles governing research on animals.

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Thank You very much for your interest, my co-authors and I look forward to your reply.

Sincerely,

Giuseppe Brisinda