

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 88589

Title: Paravertebral block's effect on analgesia and inflammation in advanced gastric cancer patients undergoing transarterial chemoembolization and microwave ablation

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 07746178

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2023-11-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-10 07:20

Reviewer performed review: 2023-11-14 08:53

Review time: 4 Days and 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<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
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

SPECIFIC COMMENTS TO AUTHORS

I read with great interest the Manuscript titled “Paravertebral Block's Effect on Analgesia and Inflammation in Advanced Gastric Cancer Patients Undergoing TACE and Microwave Ablation”, which falls within the aim of World Journal of Gastrointestinal Surgery. In my honest opinion, the topic is interesting and the study is novel enough to attract the readers’ attention. Nevertheless, the authors should clarify some points and improve the discussion citing relevant and novel key articles about the topic. However, I have a few questions for the author to clarify: 1. Was the study approved by the Ethics Committee of your hospital? Consistent with the Declaration of Helsinki? 2. The primary endpoint evaluated only the VAS score at 6, 12, 24, and 48 hours after surgery. Pain scores vary greatly among individuals and over time. As far as I know, for acute pain, it is common to use an analysis such as the Sum of Pain Intensity Difference (SPID) over a prespecified time period that reflects the expected duration of treatment effect of the product. What is the reason why SPID was not considered in this study? 3. Secondary outcome measures included sufentanil consumption during and after the procedure. Did the control group subtract the amount of sufentanil used during anesthesia?

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 07746230

Position: Peer Reviewer

Academic degree: PhD

Professional title: Doctor, Research Scientist

Reviewer's Country/Territory: France

Author's Country/Territory: China

Manuscript submission date: 2023-11-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-08 08:28

Reviewer performed review: 2023-11-14 10:31

Review time: 6 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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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

SPECIFIC COMMENTS TO AUTHORS

TACE combined with MWA is an effective treatment strategy for patients with advanced gastric cancer and liver metastasis. Xiong YF et al. conducted an observational study to compare the effect of PVB with intravenous analgesia on postoperative pain and inflammatory responses in these patients. The article is informative and well presentation. The method is described in detail. The tables help the readers to make a more understanding of the study. As stated by the authors, limitations of this study in fact were that it was a single-center study and that the authors did not measure other outcomes that could be affected by PVB, such as patient satisfaction, quality of life, length of stay, or survival, limit the impact of this study. However, as far as the present results are concerned, they are still sufficient for publication in this journal, and the authors are advised to make minor modifications. 1) I went to ClinicalTrail website to search with NCT04567890 and did not search the authors' studies. Please confirm that the NCT number provided is correct? 2) The anesthesia methods of the two groups are different, please elaborate on how the blind method was maintained in the study. 3) The control group received intravenous sufentanil analgesia before and during the procedure.



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Does this affect the collection of intraoperative and postoperative sufentanil consumption for secondary outcomes? 4) Need to add references in the past five years.