



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57133

Title: Distal gastric tube resection with vascular preservation for gastric tube cancer: A case report and review of literature

Reviewer's code: 00068674

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2020-06-15

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-06-20 06:43

Reviewer performed review: 2020-06-20 07:27

Review time: 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 Grade E: Do not publish
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



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SPECIFIC COMMENTS TO AUTHORS

This article described the resection of the distal gastric tube with preservation of RGEA and RGA for gastric tube cancer. GTC that had invaded the duodenum has a certain probability of lymph node metastasis, especially in No.5 and No.6. Preservation of RGEA and RGA may affect the completeness of lymph node dissection. Such a surgical method also increases the operation time. Preservation of the gastric stump also increases the possibility of gastric stump cancer. However, for an 82-year-old patient, with hypertension and chronic renal disease, such a surgical approach maybe reasonable. Please provide images of enhanced CT scans.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57133

Title: Distal gastric tube resection with vascular preservation for gastric tube cancer: A case report and review of literature

Reviewer's code: 03725838

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2020-06-15

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-06-22 04:29

Reviewer performed review: 2020-06-29 14:22

Review time: 7 Days and 9 Hours

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 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 type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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SPECIFIC COMMENTS TO AUTHORS

1. For stage T1b cancer, the standard treatment should include D2 lymphadenectomy rather than local excision, because of the difficulties identifying lymph node status pre-operatively. 2. There might exist residual tumor when the RGEA and RGA were preserved. Besides, the preservation of vessels might account for relatively long operation time. 3. In INTRODUCTION part, the author noted that "Recent advances in the diagnosis and treatment of esophageal cancer have improved prognosis after esophagectomy but have also led to an increasing occurrence of gastric tube cancer", could you further demonstrate the association of improved prognosis of esophageal cancer and increased occurrence of GTC. The same situation also existed in DISCUSSION part "Due to recent advances in the diagnosis and treatment of esophageal cancer, surgical outcomes have improved and the prevalence of GTC after esophagectomy has increased to 2.1-3.5%". 4. The language still needs some polishing. 5. A systemic review of all eligible literatures regarding the clinical characteristics and treatment of GTC would be more tempting.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57133

Title: Distal gastric tube resection with vascular preservation for gastric tube cancer: A case report and review of literature

Reviewer's code: 00068674

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2020-06-15

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-08-09 08:31

Reviewer performed review: 2020-08-09 08:44

Review time: 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
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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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



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As for the reviewer's questions, the author has made corresponding modifications.