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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70257

Title: Surgical treatment of acute cholecystitis in patients with confirmed COVID-19: Ten

case reports and review of literature

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05820886

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Attending Doctor, Lecturer

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Mexico

Manuscript submission date: 2021-07-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-29 21:42

Reviewer performed review: 2021-09-03 08:14

Review time: 4 Days and 10 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Authors did a fine job reporting their findings. All parts of the paper, introduction, methods, results and especially literature review and discussion is presented in a nice and concise way. Although the findings reported by authors have been extensively reported in the literature previously (which they have also discussed), I would publish this paper only for the literature review. No further remarks. Checklist: 1 Title. Does the title reflect the main subject/hypothesis of the manuscript? - YES 2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? - YES 3 Key words. Do the key words reflect the focus of the manuscript? - YES Does the manuscript adequately describe the background, present status and significance of the study? - YES 5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? - YES 6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field? -7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? - YES 8 Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? Do figures require labeling with arrows, asterisks etc., better legends? - YES 9 Biostatistics. Does the manuscript meet the requirements of biostatistics? - YES 10 Units. Does the manuscript meet the requirements of use of SI units? - YES 11



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References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? - YES 12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? - YES 13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and 14 Ethics statements. For all manuscripts involving human studies reporting? - YES and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? - YES



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Reviewer's code: 06133356 Position: Peer Reviewer Academic degree: MD

Professional title: Medical Assistant

Reviewer's Country/Territory: Iran

Author's Country/Territory: Mexico

Manuscript submission date: 2021-07-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-30 19:47

Reviewer performed review: 2021-09-11 11:38

Review time: 11 Days and 15 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

No comments



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Peer-review model: Single blind

Reviewer's code: 06106925 Position: Peer Reviewer Academic degree: MD

Professional title: Surgeon

Reviewer's Country/Territory: Colombia

Author's Country/Territory: Mexico

Manuscript submission date: 2021-07-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-29 19:21

Reviewer performed review: 2021-09-11 15:02

Review time: 12 Days and 19 Hours

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
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Peer-reviewer

statements

Peer-Review: [] Anonymous [Y] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Greetings, here are some insights regarding the Manuscript: 1. According the to manuscript in full content, in the abstract, the aim should state perioperative assessment and afterward use the word POSTOPERATIVE outcomes rather than "...the *perioperative* outcomes..." in that specific sentence to be precise. 2. State why the patients were screened or had SARS-CoV-2 infection within the differential diagnostics, for them to be tested by reverse-transcriptase polymerase chain reaction (RT-PCR) assay of a nasopharyngeal swab or a rapid antigenic test. Multiple 3. grammar corrections such as spelling number of patients with words, punctuation among others, for example, here would be a better way to draft the Results within the abstract: A total of 10 SARS-CoV-2 positive patients with concomitant acute cholecystitis were analyzed. Six were males, the mean age was 47.1 years, the mean BMI was 28.4, and 6 patients were classified as high risk according to the qSOFA score. Nine patients had moderate, and one patient had severe acute cholecystitis. All patients were treated with urgent/early laparoscopic cholecystectomy. Regarding the Parkland grading scale, two patients were Parkland 3, two were Parkland 4, and six were Parkland 5. Eight patients required a bail-out procedure (6 required subtotal reconstituting cholecystectomy and two open conversions). The mean blood loss was 258 mL, the mean operative time was 133.5 min, and eight patients required closed intraabdominal drainage. Four patients developed a biliary leak after subtotal cholecystectomy and required ERCP with biliary sphincterotomy and biliary stent placement. After surgery, five patients required ICU admission, which developed ARDS related to SARS-CoV-2. One patient died after cholecystectomy due to ARDS complications. Considering the complete cohort, the



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mean total length of stay was 18.2 days. The histopathological diagnosis demonstrated transmural necrosis (n=5), hemorrhagic infarction (n=2), vessel obliteration with ischemia (n=3), gallbladder wall perforation (n=3), and acute peritonitis (n=10). 4.

Methods, results, and discussion are thoroughly well structured and have valuable scientific content, with only minor grammar mistakes to be polished.