



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 76092

Title: A nomogram to predict permanent stoma in rectal cancer patients after sphincter-saving surgery

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05119548

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-04 08:19

Reviewer performed review: 2022-03-05 01:46

Review time: 17 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 Grade E: Do not publish
Language quality	<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
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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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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 manuscript was described with a very interesting point of view. If possible, a validation cohort should be used to assess this monogram.



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Peer-review model: Single blind

Reviewer's code: 04123904

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-04-28 08:27

Reviewer performed review: 2022-04-28 09:46

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



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SPECIFIC COMMENTS TO AUTHORS

This is a well written article, but have some concerns to be addressed. #Major comments
Seven variables extracted in the multivariate analysis were used to construct the nomogram. However, of these, only liver disease did not have a significant P value in the univariate analysis, and I feel uncomfortable about using this as a variable for nomogram construction. What are the authors' views on this matter? If liver disease is to be used as a variable for constructing the nomogram, a discussion of the association between liver disease and permanent stoma should be included in the manuscript.



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Peer-review model: Single blind

Reviewer's code: 03805385

Position: Peer Reviewer

Academic degree: FASCRS, MD, PhD

Professional title: Assistant Professor, Attending Doctor, Senior Research Fellow, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-04-27 10:37

Reviewer performed review: 2022-04-28 14:13

Review time: 1 Day and 3 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
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

Thank you very much for the opportunity to review this retrospective paper for the World Journal of Gastrointestinal Surgery: A nomogram to predict permanent stoma in rectal cancer patients after sphincter-saving surgery I have some questions and comments for the authors: 1. It is not appropriate to use abbreviations in the abstract. 2. Why do you excluded metastatic patients for this study? 3. Redudant in the Methodology: Inclusion criteria: No evidence of distant metastasis at the time of surgery. Exclusion criteria: patients with stage IV disease. 4. How do the authors could use the variables that affect the quality of the patient, if you included some variables as: local recurrence, anastomosis site stenosis and liver disease (exclusiononn criteria). It is at least something to discuss.



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Title: A nomogram to predict permanent stoma in rectal cancer patients after sphincter-saving surgery

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05382317

Position: Peer Reviewer

Academic degree: FRCS (Hon), MD

Professional title: Doctor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-04-27 09:38

Reviewer performed review: 2022-05-06 23:18

Review time: 9 Days and 13 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS

This study established a predictive model to predict the risk of PS in patients with rectal cancer after sphincter-saving surgery, which has certain clinical significance. Whether preoperative clinical staging was carried out using MRI, and whether all patients received preoperative chemoradiotherapy was performed prophylactic stoma? Reportedly, preoperative chemoradiotherapy for patients with rectal cancer may increase anastomotic leakage, does it increase the risk of permanent stoma? This was a retrospective study, and a multicenter RCT was necessary to confirm the issue in future.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04732834

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Director, Full Professor, Surgical Oncologist

Reviewer's Country/Territory: Romania

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-03 19:55

Reviewer performed review: 2022-05-09 17:16

Review time: 5 Days and 21 Hours

Scientific quality	<input 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
Language quality	<input 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
Conclusion	<input 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
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No



Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

I believe the paper is extremely interesting and a pleasure to read. Data appear to be very real and presented with great accuracy. I have a couple of comments and questions that might be responded in order to improve the paper. 1. colonoscopy surveillance every 3 months after first year is to me an exaggeration. There is no additional risk of colonic cancer after a complete colonoscopic evaluation. If that was not a mistake, you should better explain why you do that. 2. 7.1% APR is in my experience very low. Is it a bias related to the type of referral? Maybe i discussion a few phrases related to indication of sphincter saving and such a low incidence of APR. 3. Figure 1 gas a small mistake: 5th raw re-stoma is not 96 but 14 4. Figure 2 is almost clear. Easy to understand how you compute the linear predictive value, but not clear how that will translate in predictive value. How do you interpolate the last raw and how do you use this value in clinical setting. I am not a statistician expert but I fail to fully comprehend how I can use this is my clinic and what do I estimate the chances of permanent stoma. It is my belief that you should discuss a bit more on the information from the nomogram and its usage in rela life.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 04123904

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-06-26 13:54

Reviewer performed review: 2022-06-27 09:38

Review time: 19 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

The authors revised the manuscript well, according to the reviewers' comments.



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Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

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Reviewer accepted review: 2022-06-27 15:07

Reviewer performed review: 2022-06-27 15:32

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

SPECIFIC COMMENTS TO AUTHORS

This study established a predictive model to predict the risk of PS in patients with rectal cancer after sphincter-saving surgery, which has certain clinical significance. However, a multicenter RCT was necessary to confirm the role in future.



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Professional title: Assistant Professor, Attending Doctor, Senior Research Fellow, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-03-04

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-06-26 15:51

Reviewer performed review: 2022-06-28 00:06

Review time: 1 Day and 8 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
Language quality	<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
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



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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

Thank you so much for the opportunity to re-review this paper: A nomogram to predict permanent stoma in rectal cancer patients after sphincter-saving surgery. Every question and comment that I made was answer. Im happy with the corrections.