

## PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 84628

Title: Reoperation for heterochronic intraductal papillary mucinous neoplasm of the

pancreas after bile duct neoplasm resection: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00057642 Position: Peer Reviewer Academic degree: MD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Turkey

Author's Country/Territory: China

Manuscript submission date: 2023-03-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-06 06:43

Reviewer performed review: 2023-04-06 07:11

Review time: 1 Hour

	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation



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Scientific significance of the	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair
conclusion in this manuscript	[ ] Grade D: No scientific significance
	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language
Language quality	polishing [ ] Grade C: A great deal of language polishing [ ]
	Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority)
	[Y] Minor revision [] Major revision [] Rejection
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [ Y] No

# SPECIFIC COMMENTS TO AUTHORS

Dear authors The case report presented is an interesting one written briefly and good enough. The fifth figure is unnecessary as itis mentioned within the manuscript repeatedly.



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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05429012 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Research Scientist

Reviewer's Country/Territory: Jordan

Author's Country/Territory: China

Manuscript submission date: 2023-03-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-04 01:02

Reviewer performed review: 2023-04-12 23:53

**Review time:** 8 Days and 22 Hours

	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes [ ]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

title: concise and covers the topic abstract: is well prepared. introduction: This case report appears to rely on the authors' clinical expertise and experience to present and interpret the situation. Case reports often feature few references. It would be helpful to provide epidemiological data on IPMN and IPNB incidence and prevalence, as well as management guidelines and suggestions. This would enhance the introduction and contextualize the case report. please provide more citations in the introduction part. case presentation: the patient's age is 56 years age, while in the abstract was 67 years, please this into consideration even when taking the history in consideration. figures provided would be better presented if they were more illustrated using arrows as an example. Disussion: the first paragraph of the discussion part should be removed to the introduction part. references: most references are old, please try to update them



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Peer-review model: Single blind

Reviewer's code: 03261866 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2023-03-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-09 15:01

Reviewer performed review: 2023-04-24 01:45

**Review time:** 14 Days and 10 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good
1 3	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
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) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

This case report describes a rare case of heterochronous onset of IPMN and IPNB in a same patient, with a time difference of 4.5 years between the diagnoses. The case report highlights the importance of active surgery and long-term postoperative follow-up for IPMN and IPNB. The authors stress the need for accurate diagnosis and differentiation of these two conditions to avoid misdiagnosis and inappropriate treatment. Overall, this case report provides valuable insights into the diagnosis and management of IPMN and IPNB, and underscores the importance of close surveillance and follow-up for patients with these conditions. However, the information provided in this case report is insufficient. The case report provides the pathologies only for the IPMN. A comparison between the IPNB and the IPMN is mandatory to distinguish de novo IPMN from the recurrence of IPNB (intraductal dissemination of the IPNB into the intrapancreatic bile duct). Ideally, a genetic analysis should be performed to distinguish the two conditions. What was the pathological evaluation of the stump during IPNB resection? If the stump was positive, there is a possibility of residual recurrence.