

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 34174

**Title:** Postoperative changes of manometry after restorative proctocolectomy in Korean ulcerative colitis patients

**Reviewer's code:** 00044311

**Reviewer's country:** United States

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2017-04-09

**Date reviewed:** 2017-04-10

| CLASSIFICATION   | LANGUAGE EVALUATION  | SCIENTIFIC MISCONDUCT                          | CONCLUSION  |
|--|--|--|---|
| <input type="checkbox"/> Grade A: Excellent            | <input checked="" type="checkbox"/> Grade A: Priority publishing     | Google Search:                                 | <input type="checkbox"/> Accept                                   |
| <input checked="" type="checkbox"/> Grade B: Very good | <input type="checkbox"/> Grade B: Minor language polishing           | <input type="checkbox"/> The same title        | <input checked="" type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C: Good                 |  | <input type="checkbox"/> Duplicate publication |   |
| <input type="checkbox"/> Grade D: Fair                 | <input type="checkbox"/> Grade C: A great deal of language polishing | <input type="checkbox"/> Plagiarism            | <input type="checkbox"/> Rejection                                |
| <input type="checkbox"/> Grade E: Poor                 |  | <input checked="" type="checkbox"/> No         | <input type="checkbox"/> Minor revision                           |
|  | <input type="checkbox"/> Grade D: Rejected                           | BPG Search:                                    | <input type="checkbox"/> Major revision                           |
|  |  | <input type="checkbox"/> The same title        |   |
|  |  | <input type="checkbox"/> Duplicate publication |   |
|  |  | <input type="checkbox"/> Plagiarism            |   |
|  |  | <input checked="" type="checkbox"/> No         |   |

## COMMENTS TO AUTHORS

Se Heon Oh, et al. aimed to investigate the changes of postoperative anal sphincter function and bowel frequency in Korean patients operated because of UC. They studied 127 patients with UC who underwent pouch surgery, RPC during 20 years and were retrospectively analyzed. The parameters of anal manometry and bowel frequency were compared according to the 6-month intervals until 24 months postoperatively. Manometry was used to measure the MSP and MRP. The methods used, statistics and results are clear to follow. Their observations is identical with those reported from the Western countries. The citations support the study. The language is clear. Though the manuscript is publishable in it current version, it look like some of the reported postoperative complications, such as rectaovaginal fistulae, is indicative to de novo Crohn's. Further, the authors reported bleeding and pouchitis as two different complications. Please note, bleeding in the reservoir is hallmark of pouchitis and/or bleeding in remnant rectal cuff is indicative of cuffitis. Make it clear what kind of



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bleeding they are talking about. These are minor suggestions.

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**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 34174

**Title:** Postoperative changes of manometry after restorative proctocolectomy in Korean ulcerative colitis patients

**Reviewer's code:** 03252977

**Reviewer's country:** Croatia

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2017-04-09

**Date reviewed:** 2017-04-19

| CLASSIFICATION   | LANGUAGE EVALUATION   | SCIENTIFIC MISCONDUCT                          | CONCLUSION   |
|--|---|--|--|
| <input type="checkbox"/> Grade A: Excellent            | <input type="checkbox"/> Grade A: Priority publishing                 | Google Search:                                 | <input type="checkbox"/> Accept                        |
| <input checked="" type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language polishing | <input type="checkbox"/> The same title        | <input type="checkbox"/> High priority for publication |
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| <input type="checkbox"/> Grade E: Poor                 |   | <input checked="" type="checkbox"/> No         | <input checked="" type="checkbox"/> Minor revision     |
|  | <input type="checkbox"/> Grade D: Rejected                            | BPG Search:                                    | <input type="checkbox"/> Major revision                |
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|  |   | <input type="checkbox"/> Duplicate publication |  |
|  |   | <input type="checkbox"/> Plagiarism            |  |
|  |   | <input checked="" type="checkbox"/> No         |  |

## COMMENTS TO AUTHORS

Dear Authors, I find Your article quite attractive, but it still needs some polishing. I have found some language errors, and would like to get an explanation to some things regarding manometry. In the Abstract, Result section - when You write about decreased MRP - I believe it would fit better if You use some other phrase and not "could not be completely recovered", as this needs further explanation - why it could not be? I would rather use " it didn't completely recover", or something similar... Regarding Methods - why do You use mean as a measure of central tendency ? You have a wide range for mean follow up of 0-286 months. In the section Manometry and bowel frequency, You say that frequency was reviewed by using ELECTRICAL medical records. Do You mean ELECTRONICAL? Why didn't You analyse endurance and push test? RESULTS SECTION Word „emergent“ is not appropriate in the context of performing operation - in this sense it is better to use „emergency operation“. DISCUSSION SECTION Similar as in the Abstract, perhaps it would be better to use



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some other word when mentioning in the end that MRP „could not be completely recovered“ ... All in all, I believe this article is valuable, well written and interesting to people who deal with IBD and manometric testings.