



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastrointestinal Surgery

**Manuscript NO:** 47140

**Title:** Patients with Crohn’s disease have longer post-operative in-hospital stay than patients with colon cancer but no difference in complications’ rate

**Reviewer’s code:** 04429838

**Reviewer’s country:** Iran

**Science editor:** Jin-Lei Wang

**Reviewer accepted review:** 2019-03-12 11:48

**Reviewer performed review:** 2019-03-17 06:09

**Review time:** 4 Days and 18 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

The manuscript entitled " Title: Patients with Crohn’s disease have an increased length of stay at hospital after bowel resection compared to patients with colon cancer but no difference in complications' rate " reviewed. The manuscript designed and structured



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-223-8242  
**Fax:** +1-925-223-8243  
**E-mail:** bpgoffice@wjgnet.com  
**https://www.wjgnet.com**

well. - Title is suitable. - Abstract is appropriate. Abbreviations in first use should be in completed form in abstract part. Some tyographic mistakes exist in the text. Please check whole manuscript. - Key words are suitable. - Background is well. Some tyographic mistakes exist in the text. Please check whole manuscript. - Methods designed well. Inclusion or exclusion criteria havenot mentioned properly in method. Authors should add references for outcome measures in method part. - Results Authors only mentioned to percentage of patients which completed research. It is better to add the number of patients in result in addition to percentage. - Discussion is appropriate. - Illustrations and tables: Abbreviation used in tables should be explained in legends.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- [Y] No

##### ***BPG Search:***

- The same title
- Duplicate publication
- Plagiarism
- [Y] No



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastrointestinal Surgery

**Manuscript NO:** 47140

**Title:** Patients with Crohn’s disease have longer post-operative in-hospital stay than patients with colon cancer but no difference in complications’ rate

**Reviewer’s code:** 04718191

**Reviewer’s country:** China

**Science editor:** Jin-Lei Wang

**Reviewer accepted review:** 2019-04-17 03:44

**Reviewer performed review:** 2019-04-28 09:23

**Review time:** 11 Days and 5 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This authors investigated differences in perioperative factors and their impact on postoperative outcomes in patients with colon cancer and Crohn’s disease undergoing right hemicolectomy or ileocecal resectionin a stetting of multi-centre snapshot audit.



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-223-8242  
**Fax:** +1-925-223-8243  
**E-mail:** bpgoffice@wjgnet.com  
**https://www.wjgnet.com**

They found patients with Crohn's disease were younger, had lower ASA grade and less comorbidity. The risk of postoperative complications was similar in the two groups. Patients with Crohn's disease had a significantly longer length of stay. The reason was unknown. Generally, the manuscript is well written. Some revisions may be needed; 1.The title seems a little longer. (29 words) 2.The median LOS was similar between the two groups. Is the Geometric mean methods suitable for the analysis? 3.What were the details of unplanned intraoperative adverse events (UIAE)? 4.What were the methods for bowel anastomosis? 5.For CD surgery, authors should mention the indications for surgery (stricturing or penetrating disease), pre-operative medications, pre-operative optimization. 6.What were the indications for critical care unit admission and discharge? What were the reasons for CC death (2.3%)? Which postoperative days for CRP levels? Why were the preoperative creatinine so high in CC patients? 7.Figure 2 was not mentioned in the paper. 8. "However, it is still possible that more specific." The sentence is not complete. 9.In the conclusion, "Patients with Crohn's Disease underwent less extensive surgery" may be not right, considering CD patients often have multiple lesions and internal fistulas involving different segments.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No

##### ***BPG Search:***

- The same title



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-223-8242  
**Fax:** +1-925-223-8243  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
**https://**[www.wjgnet.com](https://www.wjgnet.com)

Duplicate publication

Plagiarism

No