



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 50346

Title: A nomogram to predict prolonged postoperative ileus after gastrectomy in gastric cancer

Reviewer's code: 02575643

Reviewer's country: Italy

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-07-16 13:50

Reviewer performed review: 2019-07-16 18:16

Review time: 4 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 polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting paper, which deserves publication, more in a surgical journal than in a gastroenterology journal. I have few major points : -this is a retrospective study, and a normogram inevitably describes the "story" of the surgical intervention, and it is not



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necessarily predictive of the future. The Authors should confirm the validity of the normogram in a prospective study. -I do not understand if all patients had total gastrectomy, or not. -From their valid experience, it is evident that the more advanced the disease, and therefore more extended the operation, higher the possibility of POOI. Minor points: -In page 4 there is a mistake, the Authors stated that POOI rate was higher in younger patients. This is not the case in their results. -The introduction is too long and it should be shortened considerably -Similarly the discussion is too long and it should be shortened considerably. In the conclusions it should be underlined the importance of a proper, less traumatic operative technique to prevent prolonged POOI, and the importance to reduce post-operative pain medications.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 50346

Title: A nomogram to predict prolonged postoperative ileus after gastrectomy in gastric cancer

Reviewer’s code: 00717554

Reviewer’s country: Netherlands

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-07-16 16:16

Reviewer performed review: 2019-07-20 08:18

Review time: 3 Days and 16 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 checked="" type="checkbox"/> Grade B: Very good	<input 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 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

I would like to mention the following comments: 1- Introduction: A previous history about application of Nomogram is missing. 2- Method: A special part for explanation about nomogram is needed. 3- Results: Some explanations about Nomogram is better



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to move to method section. 4- Method: Is it not clear if the sampling method is random or not. 5-Discussion: It might be better to rewrite the discussion section with the following paragraphs: Main findings (without percentages and references), similar studies, different studies, limitations, conclusion. Good Luck

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 50346

Title: A nomogram to predict prolonged postoperative ileus after gastrectomy in gastric cancer

Reviewer’s code: 02440966

Reviewer’s country: South Korea

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-07-20 02:47

Reviewer performed review: 2019-07-21 06:07

Review time: 1 Day and 3 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 checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is a retrospectively analysis about PPOI in propsectively collected patients who underwent gastrectomy for gastric cancer. The authros stressed on the usefulness of nomogram of PPPI in patients in gastric cancer. which can be used in the real clinics.



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Because the authors analyzed the data using the detail statistical methods, the results stated in this manuscript are proper. In spite of these merits, there are several issues to be concerned. (1) As stated in the discussion section, the number of included patients is not enough. (2) The surgical methods used in this study are not well described. For example, patients who underwent total gastrectomy tend to have a higher frequency of PPOI. Therefore, more analysis based on the degree of gastrectomy (distal vs. total) and reconstruction method (B-1 vs B-2 vs REY) should be included. In addition, the degree of LN dissection (such as D1, D2, and D2+alpha) should be included in the analysis. (3) The use of gender and sex is mixedly used.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 50346

Title: A nomogram to predict prolonged postoperative ileus after gastrectomy in gastric cancer

Reviewer’s code: 02573214

Reviewer’s country: Italy

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-07-16 07:31

Reviewer performed review: 2019-07-24 17:59

Review time: 8 Days and 10 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 checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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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

In this manuscript the authors propose a normogram for predicting prolonged postoperative ileus in gastric cancer patients who underwent gastrectomy. The study was conducted with methodological rigor. The results obtained may be confirmed by



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other publications on the subject.

INITIAL REVIEW OF THE MANUSCRIPT

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BPG Search:

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- No