



## PEER-REVIEW REPORT

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

**Manuscript NO:** 67227

**Title:** Surgical Ampullectomy: A Comprehensive Review

**Reviewer's code:** 00505440

**Position:** Editorial Board

**Academic degree:** MBBS, MD, PhD

**Professional title:** Doctor, Senior Lecturer

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

**Author's Country/Territory:** United Kingdom

**Manuscript submission date:** 2021-04-18

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-04-20 08:30

**Reviewer performed review:** 2021-04-20 23:22

**Review time:** 14 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

This is a nice narrative review on a less commonly discussed topic. The authors draw on their personal experience to help inform the reader. My only suggestion to the authors is if they would consider tabulating some of the data in the section on Indications and Clinical Outcomes as currently it makes for heavy reading. The tables will help the reader appreciate the differences in the study and also reduce the amount that needs to be written in the manuscript. Overall, a comprehensive review - as promised by the authors in the abstract.



## PEER-REVIEW REPORT

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

**Manuscript NO:** 67227

**Title:** Surgical Ampullectomy: A Comprehensive Review

**Reviewer's code:** 05913806

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Surgeon

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

**Author's Country/Territory:** United Kingdom

**Manuscript submission date:** 2021-04-18

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-04-19 05:55

**Reviewer performed review:** 2021-05-07 02:03

**Review time:** 17 Days and 20 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

the suggested manuscript (surgical ampullectomy; a comprehensive review) explores the role of surgical ampullectomy for the management of benign as well as malignant diseases of the ampulla, especially in t a new era which includes new endoscopic techniques. the title reflect the main subject of the manuscript and the abstract is well written annd summarizes the manuscript. the key words do reflect the focus on the manuscript. the background, pre-operative evaluation, indications, surgical techniques and clinical outcomes are well written as well. The author prepare the manuscript according to the appropriate research methods and reporting minor revisions are suggested: 1- in the first paragraph of the introduction section, second line- "only 7% of cancers in the region"- better to say 7% of peri-ampullary tumors. 2- morbidity following endoscopic pappilectomy (EP) occured in 18.9%, including haemorrhage, pappillary stenosis and others. what was the most common complication? 3- EP as a suggested treatment for carefully selected early ampullary cancer was controversial by some authors which adviocates PD for all ampullary cancers- what is the reason for such advocacy? is it duo to lymph node involvement? 4- endoscopy using a side-viewing endoscope is a technique used for visualization of the ampulla and for taking biopsies- what is the sensitivity and specificty for such technique in regard to ampullary lesion? 5- in the indication section, paragraph about FAP- "patents"- "patients". 6- please provide the classification table developed by Spigelman. 7- what were the adbvantages and disadvantages of the suggested surgical techniques.