

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 72261

Title: Appendico-vesicocolonic fistula: A case report and review of literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03537202

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Adjunct Professor, Doctor, Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-10-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-19 09:47

Reviewer performed review: 2021-10-19 12:42

Review time: 2 Hours

| Scientific quality | [] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish |
|--------------------|---|
| 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 | Peer-Review: [] Anonymous [Y] Onymous |



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Authors reported a rare and interesting case of appendico-vesicocolonic fistula fistula. combined with appendiceal-colonic They also provide an some recommendations for the diagnosis and treatment of these rare disease along with a review of the literature. STATUS: ACCETTABLE FOR PUBBLICATION PENDING MINOR REVISIONS General considerations: This is a CASE REPORT article. The work is very interesting, the paper is very well-written, and there are not similar cases described in the literature about this topic. Abstract: the abstract appropriately summarize the manuscript without discrepancies between the abstract and the remainder of the manuscript. Keywords: adequate. Reference: adequate. Paper On some aspects, the authors should address: 1)In the diagnostic suspicion of entero-vesical fistula, have you considered the possibility of performing a plain radiograph or MRI fistulography? Please, specify it. 2)Prior to the CT scan, was an ultrasound examination performed? If so, insert the images. 3)In the discussion paragraph, it would be appropriate to consider the main pathologies entering into the differential diagnosis. Specifically, it would be interesting to mention the causes of abdominal pain in the hypogastrium and right/left iliac fossa. Among these, a particular mention to epiploic appendicitis and omental infarcts also deserve. I suggest the following readings, which I invite you to discuss and include in the references. -doi: 10.1148/rg.314105065. PMID: 21768232. -doi: 10.5114/pjr.2020.94335. PMID: 32419882; PMCID: PMC7218446. 4)An attempt could be made to insert one or two schematic drawings depicting the fistulous paths between the various organs. I believe that this trick would make the article more interesting, certainly more usable for beginners. Figures: poor. 5) The iconography is poor. In practice, non-invasive imaging is reduced to



a single CT image. If there are, it would be advisable to insert ultrasound, fistulography and MRI images.



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Reviewer's code: 05465522

Position: Peer Reviewer

Academic degree: FRCS (Gen Surg), MD

Professional title: Associate Specialist, Medical Assistant, Surgeon, Surgical Oncologist,

Teacher

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-27 19:03

Reviewer performed review: 2021-11-07 22:58

Review time: 11 Days and 3 Hours

| Scientific quality | [] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish |
|--------------------|--|
| 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) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection |
| Re-review | [Y]Yes []No |



| Peer-reviewer | Peer-Review: [Y] Anonymous [] Onymous |
|---------------|---------------------------------------|
| statements | Conflicts-of-Interest: [] Yes [Y] No |

SPECIFIC COMMENTS TO AUTHORS

This is a good manuscript, a rare desease. It is a curiose case with surgical treatment and i find it interesting that the authors show images of the surgical specimen in the manuscript. I'd like to know what was done with the patient during the period from refusing the surgery until its acceptance.