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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 72593

Title: Mesh plug erosion into the small intestine after inguinal hernia repair: a case

report and review of the literature

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00071178 **Position:** Editor-in-Chief

Academic degree: FACS, FICS, MD, PhD

Professional title: Professor, Surgeon

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2021-10-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-22 06:24

Reviewer performed review: 2021-10-22 06:36

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



Baishideng **Publishing**

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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Migration of foreign bodies or materials used during gastrointestinal surgical procedures into hollow organs is a common medicolegal condition. In this study, the authors prepared a case report on the migration of mesh plug material into the intestine. However, I could not understand whether the mesh plug migrated into the intestinal lumen, that is, whether a perforation developed in the intestinal wall. The references of the article were not prepared according to the guidelines of the WJG series. The use of references in the text is not made according to the guidelines of the WJG series.



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Reviewer's code: 05388269 Position: Peer Reviewer Academic degree: MD, RN

Professional title: Assistant Professor, Attending Doctor, Doctor, Nurse, Research

Assistant, Staff Physician, Statistician, Surgeon

Reviewer's Country/Territory: Philippines

Author's Country/Territory: China

Manuscript submission date: 2021-10-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-21 09:35

Reviewer performed review: 2021-10-23 11:54

Review time: 2 Days and 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection



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

SPECIFIC COMMENTS TO AUTHORS

what are the original findings of this manuscript? 50 yo man, 20 year hx of IHR. Presented with abdominal pain. Foreign body reaction at mid segment of ileum adherent What are the new hypotheses that this study proposed? N/A to abdominal wall. What are the new phenomena that were found through experiments in this study? What are the hypotheses that were confirmed through experiments in this study? N/A. what are the quality and importance of this manuscript? to improve surgeons' knowledge regarding this complication. Presentation of MP erosion. Imaging characteristics of MP erosion after IHR. What are the new findings of this study? N/A What are the new concepts that this study proposes? Not mentioned. What are the new methods that this study proposed? N/A Do the conclusions appropriately summarize the data that this study provided? Yes, but there are 3 missed conclusions or core tips in this report which are: (1) Intestinal mesh erosion should also be included in the differential diagnosis of patients with history of inguinal hernia repair and presents with abdominal pain and (2) the need for longer follow-up to detect Mesh erosion. (3) Specific management for Intestinal mesh erosion What are the unique insights that this study presented? N/A. What are the key problems in this field that this study has solved? Clinical presentation occasional is not specific. Incidence unknown. Management strategies/guidelines lacking.