

## PEER-REVIEW REPORT

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

**Manuscript NO:** 76483

**Title:** Da Vinci robot-assisted pancreato-duodenectomy in a patient with situs inversus totalis: A case report and review of literature

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03009363

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-03-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-03-20 14:11

**Reviewer performed review:** 2022-03-20 16:52

**Review time:** 2 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 Grade E: Do not publish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 type="checkbox"/> Grade A: Priority publishing <input checked="" 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 checked="" type="checkbox"/> Yes <input 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

This is an interesting work about a rare, but not unique condition. There are already several reports about successful operations in case of SIT. However as the first Da Vinci Whipple procedure in SIT is worth for mention it. There is no list of abbreviations, provide it. In the details of the operation there is a lot of list like that: "L5, 8a, 12A were dissected". What are these? You should provide an explanation. You mention: The patient had a history of gallbladder-preserving lithotomy due to cholecystolithiasis. Explain why, as this is not an accepted mode of treatment for gallstone. There is a recent publication about biliary resection in SIT, you should refer that as well: Eitler, K., Mathe, Z., Papp, V. et al. Double rarity: malignant masquerade biliary stricture in a situs inversus totalis patient. BMC Surg 21, 153 (2021). <https://doi.org/10.1186/s12893-021-01155-w> And there is an other one for your convenience: Eitler K, Bibok A, Telkes G. Situs Inversus Totalis: A Clinical Review. Int J Gen Med. 2022;15:2437-2449 <https://doi.org/10.2147/IJGM.S295444> There are some misspellings to be corrected: p1 keywords: the name of the operation is: Whipple, p2: complaints: the patient weight loss is surely NOT 1,5 g, this is kg, or even 15 kg. history: two mo. Write instead out: months. Do not use slang abbreviations.

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**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06229302

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Assistant Professor

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

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-03-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-03-20 06:36

**Reviewer performed review:** 2022-03-23 14:24

**Review time:** 3 Days and 7 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 type="checkbox"/> Grade A: Priority publishing <input checked="" 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 checked="" type="checkbox"/> Yes <input 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

Thank you for the opportunity to review a very rare surgical case of a patient with SIT, proposed for robotic surgery in the manuscript entitled: Da Vinci robot-assisted pancreato-duodenectomy in a patient with situs inversus totalis: A case report and literature review by Baibei et al. There are, in my opinion, some minor issues that I would like to highlight: 1. English spelling correction is needed (i.e. Whiple in the table, mo-probably months etc) 2. Review of some sentences is necessary: not abnormal (better normal), "...general condition good, the condition is stable..." must be reconsidered. "Therefore, we postulated that there is no direct correlation between congenital total visceral inversion and the occurrence of choledochal carcinoma" please rephrase, no sufficient data. 3. Even if it is a surgeon perspective of a very rare case, this patient was interdisciplinary approached. So a perioperative risk score assessment (ASA, Lee Score or similar) should be addressed in the case presentation. Any other chronic comorbidities? Does the patient presented any anesthetic particularitis? (sleep apnea, heart etc) 4. Could you justify/ motivate the surgical approach (daVinci), which is, however, not necessary, the standard of care? 5. In the subsection entitled outcome and follow-up, could you mention the time spent in ICU 6. Please mention the total time spent in hospital 7. You mentioned about postoperative severe complications? Were there any? There are some reports that advocates the prolonged apnoea, pseudocolinestherasis deficits or airway obstruction...

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**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05098925

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor, Doctor, Lecturer, Staff Physician

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

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-03-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-03-20 08:15

**Reviewer performed review:** 2022-03-26 08:56

**Review time:** 6 Days

<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 type="checkbox"/> Grade A: Priority publishing <input checked="" 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 checked="" type="checkbox"/> Yes <input 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

Da Vinci robot-assisted pancreato-duodenectomy in a patient with situs inversus totalis: A case report and literature review

You have demonstrated the distal cholangiocarcinoma in patient with Situs inversus totalis (SIT) and underwent successful pancreaticoduodenectomy with the assistance of a da Vinci robot. Your article is interesting in this is the first case of da Vinci robot assisted pancreaticoduodenectomy. The authors should be commended on their work. There are a few areas where additional information would enhance the manuscript. 1. In the last line of page 1, as author mentioned "patient with situs inversus totalis", please change to Abbreviations. 2. To enhance the readiness, please provide the normal ranges of presenting laboratory. 3. In figure 1a, I think the arrow point to the wrong area (arrow mention point to heart but end of arrow point to trachea). Please consider changing adjust the arrow. 4. It would be more impressive if author provide the picture of pathologic finding of immunohistochemical staining. 5. In the "outcome and follow up" section, author described that "There were no severe complications during or after the operation, and the patient was discharged once the abdominal incision healed". Can you reveal the accurate length of hospitalization after surgery? 6. In the "discussion" section, author described that "Whipple operation was performed in 8 patients, and 1 patient underwent choledochectomy + Roux-en-Y hepaticojejunum". I think this sentence was not complete. 7. The "conclusion" section is redundant, please adjust it more concisely.