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# PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

**Manuscript NO:** 83314

**Title:** Surgical complications of oncological treatments: A narrative review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05752133

Position: Peer Reviewer

Academic degree: MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: Japan

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

**Manuscript submission date:** 2023-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-16 23:30

Reviewer performed review: 2023-01-17 00:17

Review time: 1 Hour

	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ Y] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ Y] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ Y] Grade C: Fair [ ] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ Y] Grade C: Fair [ ] Grade D: No scientific significance
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
Re-review	[Y]Yes [ ]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

Reviewer's results on the article of 83314 submitted to World Journal of Surgical Oncology Major comments This is the article of mini-review of complications of surgical gastro-intestinal tracts after chemotherapies. The authors summarized five categories as the follows: enteritis, pneumatosis intestinalis, bleeding, and others including cholecystitis and second cancers. However, non-obstructive mesenteric obstruction (NOMI) must be included because it has been reported (Ref: Three cases of non-occlusive mesenteric ischemia that developed after head and neck cancer therapy. Nagano H, Fujiwara Y, Matsuzaki H, Umakoshi M, Ohori J, Kurono Y.Auris Nasus Larynx. 2021 Dec;48(6):1193-1198. doi: 10.1016/j.anl.2020.07.003.). In addition, these results could be summarized in tables for readers' easily understandings. abovementioned comments are added, this article could be accepted after re-reviewing. Minor comments 1. The line numbers could be added for suggestions for corrections. 2. The age and clinical diagnoses might be added to understand for readers as the side effects of chemotherapies.



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Reviewer's code: 05476795 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Indonesia

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

Manuscript submission date: 2023-01-16

**Reviewer chosen by:** AI Technique

Reviewer accepted review: 2023-01-18 00:22

Reviewer performed review: 2023-01-18 05:01

**Review time:** 4 Hours

Scientific quality	[ ] Grade A: Excellent [ Y] Grade B: Very good [ ] Grade C:  Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation



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Conclusion	[ ] Accept (High priority) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

1. the patients in the data are patients on oncological treatments. Is it safe to do surgery considering the risk of bleeding and infection is higher than normal people? If you have to take action, can the patients continue the oncological treatment again? 2. maybe in the conclusion can be given data on what gastrointestinal complications are most likely to occur, based on the presentation of the emergence of cases