

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 88308

Title: Post-operative morbidity after neoadjuvant chemotherapy and resection for gallbladder cancer: A national surgical quality improvement program analysis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02832130

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2023-09-23

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-02 01:31

Reviewer performed review: 2023-11-06 07:47

Review time: 4 Days and 6 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The author actually compared the postoperative results (complications) of neoadjuvant chemotherapy (NACT) and surgery and surgery only groups. The results of this manuscript may assist surgeons in determining whether NACT would be beneficial for their patients prior to undergoing surgery with regards to postoperative results. The subject of this manuscript is of value, but there are a few of defects need to be modified.

1, Peri-operative morbidity is used in the title, 30-day post-operative morbidity and post-operative complications are used in the text. The author should choose a more appropriate term based on the research purpose.

2, When the term neoadjuvant chemotherapy first appeared in the text, the abbreviation NACT was provided. However, when the term reappeared in the following text, the full name (neoadjuvant chemotherapy) was used instead of the abbreviation (NACT). Please check and modify.

3, Does neoadjuvant therapy refer to NACT? If so, should the author consider replacing it with NACT.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00070109

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor, Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2023-09-23

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-02 14:08

Reviewer performed review: 2023-11-06 14:50

Review time: 4 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

There have been few studies that have evaluated the effects of neoadjuvant therapy (NACT) for gallbladder cancer, and the beneficial of NACT for gallbladder cancer is still unknown. The present study had assessed if neoadjuvant chemotherapy in gallbladder cancer increased the risk for post-operative morbidity, and found that there was no statistical significance of any of these complications between the NACT and upfront surgery group. So there are some useful information in this manuscript. But there are several limitations in this article, such as the primary outcome just being bile leakage, the smaller study sample, the absence of specific details of treatment.