

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 77136

Title: Endoluminal vacuum-assisted therapy as a treatment for anastomotic leakage in colorectal surgery

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06196661

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Lecturer, Senior Researcher, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2022-04-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-16 16:24

Reviewer performed review: 2022-04-17 07:06

Review time: 14 Hours

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|--------------------|---|
| Scientific quality | <input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Very good <input type="radio"/> Grade C: Good <input type="radio"/> Grade D: Fair <input type="radio"/> Grade E: Do not publish |
| Language quality | <input checked="" type="radio"/> Grade A: Priority publishing <input type="radio"/> Grade B: Minor language polishing <input type="radio"/> Grade C: A great deal of language polishing <input type="radio"/> Grade D: Rejection |
| Conclusion | <input type="radio"/> Accept (High priority) <input checked="" type="radio"/> Accept (General priority) <input type="radio"/> Minor revision <input type="radio"/> Major revision <input type="radio"/> Rejection |
| Re-review | <input type="radio"/> Yes <input checked="" type="radio"/> No |



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| 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 |
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SPECIFIC COMMENTS TO AUTHORS

I would like to congratulate the authors for their commentary. I have no further recommendations

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Peer-review model: Single blind

Reviewer's code: 04164271

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2022-04-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-17 10:20

Reviewer performed review: 2022-04-21 08:07

Review time: 3 Days and 21 Hours

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|--------------------|---|
| 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 |
| 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |



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|-------------------------------------|---|
| Peer-reviewer statements | Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input checked="" type="checkbox"/>] Yes [<input type="checkbox"/>] No |
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SPECIFIC COMMENTS TO AUTHORS

This article provides a logical explanation of anastomotic leakage (AL), from its causes and classification to its treatment. I believe this article will help many readers understand the most troublesome postoperative complication, AL, and provide useful advice for future daily clinical practice.

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Reviewer's code: 04970307

Position: Peer Reviewer

Academic degree: MMed

Professional title: Associate Chief Physician, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2022-04-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-19 08:08

Reviewer performed review: 2022-04-24 07:54

Review time: 4 Days and 23 Hours

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|--------------------|---|
| 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 |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 |

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|-------------------------------------|---|
| Peer-reviewer statements | Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No |
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SPECIFIC COMMENTS TO AUTHORS

The authors wrote a comment on a review which comprehensively summarized the treatment of colorectal anastomotic leakage (AL) with endoluminal vacuum therapy. Except that the authors agree that EVT is a feasible strategy to treat AL already occurred, I think they mainly aimed to highlight the importance and strategies to prevent the onset of AL, but not the onset of complications of AL, as majority of this manuscript are discussing on basic mechanical patency tests, intra-operative fluorescence angiography with indocyanine green, diverting stoma, and TDT, all are strategies to decrease the incidence of AL. Therefore, the key sentence “It seems obvious to us that in case of AL it is better to prevent its complications rather than treat them once they have arisen” is not consistent with the emphasis of this comment. I also advice revision of the “Abstract” and “Core tip” correspondingly.