

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 78818

Title: Real-time in vivo distal margin selection using confocal laser endomicroscopy in transanal total mesorectal excision for rectal cancer

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06293315

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-07-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-16 17:13

Reviewer performed review: 2022-07-27 13:14

Review time: 10 Days and 20 Hours

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 Grade E: Do not publish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 type="radio"/> Accept (General priority) <input checked="" type="radio"/> Minor revision <input type="radio"/> Major revision <input type="radio"/> Rejection
Re-review	<input checked="" type="radio"/> Yes <input type="radio"/> No



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

The authors assessed the feasibility of pCLE to select the DRM during TaTME for low rectal cancer. I am very interested in this report and personally think it worth for publication. However, I have one question. #1. You described “The probe has a field of view of 240 μ m and can image at a depth of 60 μ m below the mucosal surface.” in the Materials and Methods section. Therefore, pCLE can only evaluate in the mucosal layer. However, the cancer cells sometimes crawl mainly submucosa rather than the mucosal layer such as poor differentiated adenocarcinomas. How do you think we should handle such cases?

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Reviewer's code: 05381893

Position: Peer Reviewer

Academic degree: MBBS

Professional title: Doctor, Research Fellow, Research Scientist

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-07-16

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-20 18:43

Reviewer performed review: 2022-10-20 19:34

Review time: 1 Hour

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
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
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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
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SPECIFIC COMMENTS TO AUTHORS

In the manuscript entitled “Feasibility of real-time in vivo distal resection margin selection guided by probe-based confocal laser endomicroscopy in transanal total mesorectal excision for low rectal cancer”, the authors evaluated the feasibility of optical biopsy using probe-based confocal laser endomicroscopy to select the DRM during Transanal total mesorectal excision for low rectal cancer. Overall, the manuscript is well written and easy to read and understand. However, the study is suffering without a lot of important variables to support its conclusion. 1) The sample is very small, without proper follow-up details for these patients. 2) Epithelial features should also be considered during pCLE evaluation of rectal cancer. Using such strataegy, the colonic crypt architecture was classified into three types. However, the authors failed to give clear features of both epithelial and vascular structures to the accuracy of pCLE, which is very important to know the accuracy of the resection. 3) In methods, the authors need to discuss the preprodecure preparation details of the pCLE procedure, like probe usage 4) pCLE-related details are lacking, the authors didn’t include the details like what is the resolution, magnification, and at frame in the examination was performed. 5) pCLE Classification System was not discussed which is most important to assess the accuracy 6) Based on the literature, combining pCLE with epithelial features and vascular scoring could improve the diagnosis of the presence of residual rectal neoplasia 7) Intra- and interobserver agreements were not calculated in this study. Reliability assessment can be done by means of intraclass correlation coefficients 8) pathology features of TME grades to assess the quality of TME specimens are lacking TaTME outcomes are based on the surgeons’ experiences; hence, it would be better to include these details in the methods

section. 9) pCLE probe-based confocal laser endomicroscopy features, whether it showed as no neoplastic features or had any residual compared to the biopsy report that needs to be clearly rewritten 10) Please include follow-up endoscopy detail and the results of pCLE in lesions with partial and complete clinical response.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Academic degree: MBBS

Professional title: Doctor, Research Fellow, Research Scientist

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-07-16

Reviewer chosen by: Jing-Jie Wang

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Reviewer performed review: 2022-11-14 13:58

Review time: 1 Hour

Scientific quality	<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
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
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Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

The authors have addressed my concerns and comments. It looks much better now.
Good luck