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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 9733
Title: The improvement of obesity-related co-morbidities, bariatric surgery, and gut hormones secretion
Reviewer code: 01587889
Science editor: Gou, Su-Xin
Date sent for review: 2014-03-07 08:48
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Obesity is both welfare and none-welfare worldwide problem. Traditional weight loss therapies – low-energy diets, excise, behavior therapy and pharmacotherapy have been continuously implemented but still have relatively poor long-term success and mainly scarce adherence. Bariatric surgery is to date the most effective long term treatment for severe obesity and it has been proven to reduce obesity-related co-morbidities, among them nonalcoholic fatty liver disease, and mortality. Finelli et al. summarizes variations in gut hormones following the current metabolic prophylactic surgery procedures. The profile of gut hormonal changes after bariatric surgery represents a strategy for the individuation of the most performing surgical procedures to achieve clinical results. The review validates the available publications regarding "the improvement of obesity-related co-morbidities of bariatric surgery and gut hormones secretion" to date. GI peptide/ hormone are chemical messengers that regulate secretory, mechanical, and trophical functions of the gut. Bariatric surgery manipulation will reduced but maintain GI continuity that involves altering gut-associated lymphoid tissue among other anatomic changes that lead to changes in GI peptides/ hormones. In addition, the manipulated stomach epithelium responds to a wide variety of stimuli by adjusting its cellularity and function. These adaptive mechanisms involve systemic factors, such as humoral and neural stimuli, as well as local factors, such as changes in nutrients. This review is fine and well summarized and I am comfortable with it to be published in its current form in the World Journal of Gastroenterology.

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ESPS Peer-review Report
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS
Since obesity is a quite serious condition as it is implicated in the development of diseases such as CVD, T2DM and cancer together with the fact that obesity has acquired epidemic characteristics makes its study obesity one of the highest priorities for the maintenance of public health. The review describes interesting recent findings about the treatment of this condition using bariatric surgery and proposes that this therapeutic approach could find potential application in the treatment of T2DM and NAFLD. Although the organisation of the material is logical the provided information in several places is overflowing and sometimes redundant making it difficult for the reader to understand the message the authors want to get through. The section entitled "Peripheral Feedback Signals" could be better described by providing a figure illustrating these events and their physiological outcome. Data presented in Tables indicate the inconsistences reported in studies, but the authors should provide clear conclusions based on their own research or their analysis of the published data instead of just presenting some potential explanations that justify the inconsistences. The section entitled "Hormonal Basis of Bariatric Surgery" contains a long introduction the necessity of which is not apparent. The molecular pathways affected by hormone signaling are mentioned only for leptin (JAK-STAT and MAPK signal transduction) and not for any other hormone and even in the case of leptin the description is only one sentence which is not informative. The section entitled "Gut Microbiota and Bariatric Surgery" contains a long introduction which does directly address the link between gut microbiota and bariatric surgery. The future directions section contains irrelevant material which could be omitted. The conclusion does not address the title of the review. There are many spelling grammatical and syntactic errors.