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ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5453

Title: The use of intraperitoneal drains during open and laparoscopic appendectomy in the management of complicated appendicitis.

Reviewer code: 00734515

Science editor: Song, Xiu-Xia

Date sent for review: 2013-09-09 15:48

Date reviewed: 2013-10-17 15:37

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

I question the value of including only two cases of lap appendectomy when obviously no conclusions could be drawn based on this small number. I am not sure also whether the numbers included in the study were based on any power calculation as it is quite possible that an adequately powered study could have detected other important real differences.



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ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5453

Title: The use of intraperitoneal drains during open and laparoscopic appendicectomy in the management of complicated appendicitis.

Reviewer code: 00069988

Science editor: Song, Xiu-Xia

Date sent for review: 2013-09-09 15:48

Date reviewed: 2013-10-19 03:35

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Excellent article. No changes needed.



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ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5453

Title: The use of intraperitoneal drains during open and laparoscopic appendicectomy in the management of complicated appendicitis.

Reviewer code: 00181254

Science editor: Song, Xiu-Xia

Date sent for review: 2013-09-09 15:48

Date reviewed: 2013-10-23 16:37

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Dear Editor-in-chief,

Dr Gravante and colleagues present an interesting review about the use of intraperitoneal drains after appendicectomy for complicated appendicitis. Although the paper has some interest some major and minor issues should be addressed. I particular several parts of Results should be moved to Discussion section.

Materials and Methods

It is not clear to me whether an acute appendicitis with an already concomitant periappendix abscess is a "complicated" appendicitis. If it is, it should be stated.

The main and secondary end-points of the analysis (abscess formation rate, surgical site infection rate,...) should be clearly stated.

Results

The author should explain why they did exclude single port surgery and NOTES from the review. If we can admit that NOTES is a totally different approach, also implying a lesser (or none) use of drains, I definitely do not understand why single port has been excluded.

In the Results, the lines 12-21 of the second page and 26-until the end of paragraph should belong to Discussion. The same, in the 3rd page of Results, for lines 7-9 and 21-26, and in the 4th page, lines 24 until the end of Results section.

The last few lines of "literature search" and the first ones of the following paragraph are grossly the same.

Moreover, it seems that laparoscopic procedures were finally excluded.

Three out of 12 studies finally included did not analyze the rate of abscess formation. It is questionable that they should be included in the review.

Antibiotic regimen in the reported studies should be reported.

Also considering the inevitable bias of such a retrospective analysis, I do not understand why some analysis on the whole series (pooling data or whatsoever...) concerning abscess rate, surgical site infection is not possible (of course, after having cited all the potential limitations of this analysis in such a heterogeneous group of articles).

In the paragraph dealing with "Rate of other postoperative complications" paragraph, operative time and hospital stay are reported, although they are not properly complications.

The paragraph about laparoscopic appendectomy starts with a brief description of the two papers: as they are described I do not see the difference between the two papers.

More details of the two laparoscopic papers should be given, as there is not any table to resume those numbers. For example, the percentage of patients with abscess, for example, is not enough and the absolute no. of patients with abscess should be reported. I guess the two papers may be added in the table.

Discussion

The division in non-complicated (macroscopically normal, inflamed or purulent) and complicated (gangrenous, necrotic or perforated), with relative incidences, is not referenced. Moreover, the term complicated is confusing, since the authors refer to the rate of (postoperative) complications.

Lines 9-14 of the second page of Discussion are arbitrary and non-referenced. Since they seem to me more an authors' opinion, it should be stated.

Line 18 of the second page of Discussion: 9/12 instead of 9/11?

Line 27-28 of the second page of Discussion: the sentence needs references.

All the last page of Discussion should be removed, as it deals with laparoscopic appendectomy in general and does not treat the issues related to drain placement in detail.

Table

Statistical significance ($p < 0.05$) should be added after any column reporting the occurrence of abscess, postoperative ileus, SSI, etc.

As already stated, some analysis on the whole series (pooled analysis or others..) including all the papers should be performed.