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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31920

Title: Pancreaticoduodenectomy in patients ≥ 75 years of age: are there differences with other age ranges in oncological and surgical outcomes? Results from a tertiary referral center.

Reviewer's code: 03442213

Reviewer's country: China

Science editor: Jing Yu

Date sent for review: 2016-12-16 17:26

Date reviewed: 2016-12-25 13:51

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input checked="" 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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This article is good on the whole, has some clinical significance. The study design is very standard and scientific. However, whether the age is the contraindication of pancreaticoduodenectomy, we should further consider the anesthesia risk, quality of life and overall benefits, surgical trauma itself has reached the controllable with the development of surgery.



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Title: Pancreaticoduodenectomy in patients ≥ 75 years of age: are there differences with other age ranges in oncological and surgical outcomes? Results from a tertiary referral center.

Reviewer's code: 03475242

Reviewer's country: Japan

Science editor: Jing Yu

Date sent for review: 2016-12-16 17:26

Date reviewed: 2017-01-08 09:40

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

This is very interesting study which is well desinged. The followings are minor comments. (1) There are no information of exact total number of cases in A and YE groups, including the text and table. (2) Eighty-hundreds sixty-seven patients means 8067. Is this true. It seems to me that it is eight hundred sixty seven (867).



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ESPS manuscript NO: 31920

Title: Pancreaticoduodenectomy in patients ≥ 75 years of age: are there differences with other age ranges in oncological and surgical outcomes? Results from a tertiary referral center.

Reviewer's code: 00739711

Reviewer's country: France

Science editor: Jing Yu

Date sent for review: 2016-12-16 17:26

Date reviewed: 2017-01-08 21:18

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Interesting study, well structured. Minor language polishing. I agree with the authors that the age of the patient is becoming less important in the indication of large surgery but a very strict evaluation of quality of life (QOL) must be performed in order to evaluate the benefit-risk of these patients.