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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18811

**Title:** Single-incision laparoscopic surgery for biliary tract disease

**Reviewer's code:** 02478901

**Reviewer's country:** Sweden

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-05-04 09:56

**Date reviewed:** 2015-08-18 18:33

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		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

Well written manuscript, but it seems too big for publication in a Medical journal. Looks more like a book chapter.

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18811

**Title:** Single-incision laparoscopic surgery for biliary tract disease

**Reviewer's code:** 01441415

**Reviewer's country:** Japan

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-05-04 09:56

**Date reviewed:** 2015-08-10 06:28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		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

Comments to the authors This manuscript by Chuang SH et al. presented a current comprehensive review of single-incision laparoscopic surgery (SILS) for biliary tract disease comparing with multi-ports surgery by focusing on clinically important factors, including technique, instruments, cosmesis, conversion, complication, and so on. The author himself has outstanding experiences and expertise of SILS. Therefore this review article is carrying a strong conviction as an expert opinion and can attract the reader. Minor Concerns Authors mentioned that big fascia incision in SILC induces more inflammatory host response, which could cause a more pain than that of MILC. Detailed information regarding the specific data from referenced articles, such as an increase of oxidative stress or inflammatory markers, are recommend to be incorporated. In contrast to SILC, available information on SILCBDE is limited due to the small number of studies. Authors mentioned the point sufficiently in the manuscript. Additionally, the actual recruited number of patients in each study is recommended to present, which would clarify the strength of the results and conclusions. In the Abstract, the authors mentioned regarding spreading alternative procedures of CBDE, such as EST and stent. However, the current circumstance is not described in the main body of the



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manuscript. The abstract should be a summary and not depart from the main body.