

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 54408

Title: Comparison of open and closed hyperthermic intraperitoneal chemotherapy: Results from the United States hyperthermic intraperitoneal chemotherapy collaborative

Reviewer's code: 03732300

Position: Peer Reviewer

Academic degree: PhD

Professional title: Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: United States

Manuscript submission date: 2020-03-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-03-06 12:58

Reviewer performed review: 2020-03-06 13:03

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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 Grade E: Do not publish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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input 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

change conclusions

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 54408

Title: Comparison of open and closed hyperthermic intraperitoneal chemotherapy: Results from the United States hyperthermic intraperitoneal chemotherapy collaborative

Reviewer's code: 01192203

Position: Peer Reviewer

Academic degree: MD

Professional title: Attending Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: United States

Manuscript submission date: 2020-03-03

Reviewer chosen by: Jin-Zhou Tang (Quit in 2020)

Reviewer accepted review: 2020-04-08 11:43

Reviewer performed review: 2020-04-08 14:08

Review time: 2 Hours

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 checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
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 investigated the impact of HIPEC method on post-operative and long-term survival outcomes in a retrospective multi-institutional caseload. The manuscript is well written, concise and the aim is clearly stated. Method and result sections are easy to follow. Statistical analysis seems appropriate. The results are well discussed. The literature is quite appropriate but I suggest to substitute ref.1 with a systematic review for colorectal and add a systematic review paper for mesothelioma after the ref.2. Some specific comments; The main result of this paper is that there is not significant difference in post-operative outcome (complications, readmission etc.) between the two groups. The article suggest that open technique is more cost-effective (mean operative time significantly shorter 6.7 versus 8.5), but this economic advantage is explained by the higher mean PCI in the closed group (higher PCI means more length of surgery). Please add this comment in the discussion section. The authors should also underline that the oncologic prognostic impact of the two study groups is strongly affect by the unbalance of indications and heterogeneity of the population treated. Good paper..