

ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5144

Title: Retroileal trans-mesenteric colorectal anastomosis

Reviewer code: 00182422

Science editor: Qi, Yuan

Date sent for review: 2013-08-18 20:51

Date reviewed: 2013-08-21 09:25

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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

1. This manuscript described one of methods of colorectal anastomosis after extended left hemicolectomy- trans mesenteric retro-ileal colorectal anastomosis. This technique is not new and has been well known by most colorectal surgeons. We hope the author can collect a substantial number of cases and compare the result of these cases with cases done by other methods so that the readers can learn more. 2. In the "core tip" of cover letter, line 3, should it be "Deloyers procedure", rather than "Delorme procedure"? 3. In P3, "In particular, the preservation of the-----, usually possible of the ileo-rectal anastomosis", we could not understand the meaning of this sentence.

ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5144

Title: Retroileal trans-mesenteric colorectal anastomosis

Reviewer code: 00505508

Science editor: Qi, Yuan

Date sent for review: 2013-08-18 20:51

Date reviewed: 2013-08-25 09:42

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" 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 checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Authors described the surgical technique of retroileal transmesenteric colorectal anastomosis. In general, for a "How I do it" to be published it will need to be truly novel in the condition it treats, and the technique used to treat that condition. Although the present procedure had been already reported, authors revived and modified this technique. The manuscript is clear and well presented. Authors are desired to address following points. How many cases underwent the present procedures? How were clinical outcomes? Have authors encountered any complications? I would like them to describe some postoperative outcomes relating to this technique.

ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5144

Title: Retroileal trans-mesenteric colorectal anastomosis

Reviewer code: 00504150

Science editor: Qi, Yuan

Date sent for review: 2013-08-18 20:51

Date reviewed: 2013-08-27 07:26

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B (Very good)	<input type="checkbox"/> [Y] 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	<input type="checkbox"/> [] No records	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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

The manuscript is well written. There are some minor points that should be addressed. The statement on page 6 that "...this seems to be more a surgeon's fear than an actual risk" is speculative and must be removed. On page 2 "...can be used as a salvage technique after either open or laparoscopic surgery". Better to say "...can be used as a salvage technique for both open and laparoscopic surgeries". Figure 1 legend does not fit the actual figure. Anal side of resection point should be described.

ESPS Peer-review Report

Name of Journal: World Journal of Surgical Procedures

ESPS Manuscript NO: 5144

Title: Retroileal trans-mesenteric colorectal anastomosis

Reviewer code: 00505493

Science editor: Qi, Yuan

Date sent for review: 2013-08-18 20:51

Date reviewed: 2013-08-30 03:17

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

The paper could be considered for publication after major revisions: 1) First of all the Authors must report their experience ,otherwise the paper is only speculative of other surgical experiences! 2) In the Discussion section there is an anatomical mistake in this sentence: "but, if a more extended resection is required with a proximal transverse colon anastomosis, the middle colic pedicle ligation is possible at the origin while marginal arteries and the Riolo's arcade will supply the colon. " the Riolo's Arcade anastomized the territory of the left transverse colon (sup. Mesenteric art.) with the descending colon (inf. Mesenteric art.) . After middle colic artery ligation the right transverse colon is supplied from Drummond's arcade. An anatomical revision needs 3) It is unclear for me how to do a window in ileal mesentery in laparoscopy . Normally the light is in the same direction of the scope, so trans-mesenteric lighting to individualize the avascular plane is impossible. Can Authors explain better their lap- technique? 4) In abstract please correct " Delorme Procedure"