

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 78395

Title: Clinical value of extended lymphadenectomy in radical surgery for pancreatic head carcinoma at different T stages

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05207387

Position: Editorial Board

Academic degree: DSc, PhD

Professional title: Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2022-07-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-04 23:26

Reviewer performed review: 2022-07-05 00:40

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 Grade E: Do not publish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 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 checked="" type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Thanks for recommending me as a reviewer. In this paper, authors aimed to evaluate the effect of extended lymphadenectomy on long-term prognosis of patients at different T stage and demonstrate its potential clinical value. Overall, this study is well written. If authors complete minor revisions, the quality of the study will be further improved. 1. line 211: "(P>0.05)" is unnecessary. Authors are advised to indicate significance level only for meaningful results to avoid confusion among readers. 2. It is recommended that the last paragraph of the discussion section go to the conclusion section.

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Title: Clinical value of extended lymphadenectomy in radical surgery for pancreatic head carcinoma at different T stages

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01588784

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-07-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-05 03:13

Reviewer performed review: 2022-07-10 07:39

Review time: 5 Days and 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input checked="" 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

General comments: The authors performed an institutional, retrospective study to evaluate the efficacy of extended lymphadenectomy (ELD) in short- and long-term outcome following surgery for pancreatic head carcinoma (PHC) at different T stage. The authors found that ELD had significantly increased number of retrieved lymph nodes as compared to those with standard lymphadenectomy (SLD), and more patients with ELD suffered from postoperative diarrhea than those with NLD. They also found that ELD provided improved both disease-free and overall survival at T3 stage, however, the benefit of ELD was not observed in patients at T1 or T2 stage. Portal vein invasion and extent of lymphadenectomy are independent factors for long-term prognosis in patients at T3 stage. Although this study shows the evident benefits of ELD on improved survival in patients with PHC at T3 stage, the impact of the authors' findings may be mild due to the lack of additional or new directions in the surgical management of PHC. The number of patients is relatively small with retrospective study design. The followings are suggestions. Confined Major points: 1. Patient selection: The study period was Jan 2011 to Dec 2021; therefore, some patients were followed up less than 6 months. To perform accurate survival analyses, all (survived) patients should complete the index period of follow-up (in this study, 3 years). 2. Inclusion and exclusion criteria: How many patients had adjacent arterial (celiac, common hepatic, and superior mesenteric artery) invasions? How many patients underwent surgery without en bloc resection? And how many patients were lost to follow-up? A flow diagram of the patient recruitment may be helpful for the queries. 3. Classification of portal vein invasion and surgical procedure (Line 128-139): Are the Chaoyang classifications

available in the literature? If so, please add the citations. If not available, additional simple figures may help readers for better understanding. 4. Figure 1 and 2: For readers who are not familiar with Japanese classification, it may be useful to show some schema with extent of lymph node dissection locating the designated lymph node stations. 5. The possible impact of perioperative chemotherapy: Recently, the efficacy of neoadjuvant chemotherapy and the advance of systemic chemotherapy using molecular targeting agents have been shown to improve survivals of patients with PHC. Discussion may include these updates as well as the importance of surgical resection with appropriate extent of lymph node dissection. Minor points: 1. Line 189-190: What is "sualci margin"? 1. Discussion can be shortened (particularly, 1st and 2nd paragraph), more focused on the observed findings with point-to-point review of the literature.

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Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 78395

Title: Clinical value of extended lymphadenectomy in radical surgery for pancreatic head carcinoma at different T stages

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03769068

Position: Editorial Board

Academic degree: PhD

Professional title: Adjunct Professor, Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-07-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-07 14:56

Reviewer performed review: 2022-07-10 15:23

Review time: 3 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 checked="" type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled "Clinical value of extended lymphadectomy in radical surgery of pancreatic head carcinoma as different T stages" by Shao-cheng Lyu describes a study that aims at evaluating the effects of extended lymphadenectomy on long-term prognosis of patients at different T stage. Their results suggests that extended lymphadenectomy may promote prognosis in PHC patients at T3 stage. The study was performed with adequade methods and obtained interesting results. It has to be emphasized that the study has important limitations, including the fact that the avarage age of extended lymphadenectomy group was younger than standard lymphadectomy group, and this might have been a crucial bias for the results obtained. However, the results still have clnical significance. The manuscript language should undergo a thorough revision. The manuscript file is not formatted according the requirements of the manuscript guidelines of this journal and it should be adjusted as well.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: Clinical value of extended lymphadenectomy in radical surgery for pancreatic head carcinoma at different T stages

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Peer-review model: Single blind

Reviewer's code: 01588784

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-07-04

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-08-31 11:50

Reviewer performed review: 2022-08-31 13:46

Review time: 1 Hour

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
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have made a tremendous effort and dedicated their time to revise this manuscript to be more valuable to readers. They have responded very well to the queries and I believe this manuscript is now recommendable to all GI surgeons.