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Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 1941

Title: Treatment options of inflammatory appendiceal masses in adults.

Reviewer code: 00069981

Science editor: l.l.wen@wjgnet.com

Date sent for review: 2013-01-16 19:10

Date reviewed: 2013-03-12 22:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[] High priority for publication
[Y] Grade C (Good)	[] Grade C: a great deal of language polishing	[] No records	[] Rejection
[] Grade D (Fair)	[] Grade D: rejected	BPG Search:	[] Minor revision
[] Grade E (Poor)		[] Existed	[Y] Major revision
		[] No records	

COMMENTS

COMMENTS TO AUTHORS:

- Chapter 2: definitions. Complicated appendicitis is usually appendicitis with gangrene, perforation, generalized peritonitis or abscess. The phlegmonous appendicitis is generally considered uncomplicated. Better specify with literature reference - Chapter 3: uncomplicated appendicitis. Distinguish between complications by citing Dindo and Clavien's classification - Chapter 4: enclosed appendicitis. Better specify this clinical entity which can be misinterpreted, with a specific reference using this terminology - Chapter 5: better specify if US or CT scan has specific indications in the diagnosis of acute appendicitis and refer to practical guidelines (i.e. Vettoretto N, Gobbi S, Corradi A, Belli F, Piccolo D, Pernazza G, Mannino L; Italian Association of Hospital Surgeons (Associazione dei Chirurghi Ospedalieri Italiani). Consensus conference on laparoscopic appendectomy: development of guidelines. Colorectal Dis. 2011 Jul;13(7):748-54. - Chapter 6: immediate surgery vs non-surgical Better clarify the indications for drainage. Most perforated appendicitis give way to generalized peritonitis and cannot be drained. Indication for drainage is the absence of generalized peritonitis and the presence of percutaneously or surgically drainable abscess. - Chapter 8: failure rate. Is there association between the abscess position or volume and the rate of failure? please specify and refer to literature Chapter 13: conclusions. Either here or in the intro the real frequency of interval appendectomy patients should be enhanced: in the current clinical practice they are very few and the real importance of this method should be better specified.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 1941

Title: Treatment options of inflammatory appendiceal masses in adults.

Reviewer code: 02512137

Science editor: l.l.wen@wjgnet.com

Date sent for review: 2013-01-16 19:10

Date reviewed: 2013-03-13 04:35

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> 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

COMMENTS TO AUTHORS:

I read and review the manuscript entitled "Treatment options of inflammatory appendiceal masses in adults" (Manuscript No 1941), according to your instructions. I agree with authors that the treatment of choice for uncomplicated acute appendicitis in adults continues to be an open problem in general surgery. This paper is very attractive and useful and my opinion is to accept them without changes.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 1941

Title: Treatment options of inflammatory appendiceal masses in adults.

Reviewer code: 00058573

Science editor: l.l.wen@wjgnet.com

Date sent for review: 2013-01-16 19:10

Date reviewed: 2013-03-16 19:30

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 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 language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input checked="" 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

COMMENTS TO AUTHORS:

The review is very ordinary. Its more of a collection of some objective data with hardly any analysis or new insight given in any of the topics. The authors have failed to include any diagram/figure or table.