

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 77926

**Title:** Malignant obstruction in the ileocecal region treated by self-expandable stent placement under the fluoroscopic guidance: A case report

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05077783

**Position:** Editorial Board

**Academic degree:** MD, MSc

**Professional title:** Assistant Professor, Surgeon

**Reviewer's Country/Territory:** Brazil

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-06-26

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-06-30 12:58

**Reviewer performed review:** 2022-06-30 14:25

**Review time:** 1 Hour

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 Grade E: Do not publish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 checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	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

The authors report a case of ileocecal obstruction by a neoplasm, that was successfully treated by placement of an endoscopic stent. This is a subject that is of scientific interest, as an increasing number of colonic neoplasms are treated with the use of SEMS. Writing in the english language is adequate, and the description of the procedure is well-detailed, with highly illustrative images. However, there are a number of issues that must be addressed by the authors: 1- In the article title, using the expression "self-expanding" or "self-expandable" metallic stent would be more accurate than "self-expanded"; 2- A major issue is that the authors state in different sections of the manuscript that there are no previous reports of this procedure. However, there are at least two articles available in Pubmed that describe similar procedures, and should be acknowledged (DOI:10.1055/s-0043-113560 and DOI:10.1155/2014/372918); 3- The history of past illness, personal and family history, physical examination, laboratory examination and conclusion sections are blank. These sections must be filled out with relevant data to the case (Was there a previous history of weight loss, abdominal pain or change in bowel habits? Was there a family history of cancer? Was the abdominal mass palpable? Did the patient had leukocytosis or anemia at presentation?) 4- Describing what was the nature of the patient's contraindication to general anesthesia would be of primary importance in this case report; 5- The patient is said to have been stabilized prior to the procedure - was he hemodinamically unstable at presentation? 6- Were there any signs of metastatic disease in the imaging exams? 7- While the authors state that the usual surgical treatment for this case would be a jejunostomy, it would actually be an ileostomy; 8- All abbreviations must be written in full the first time they appear in the text (DSA: digital



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subtraction angiography - this is also missing in the abbreviation list at the end of the manuscript); 9- There are some minor corrections in the treatment section (the catheter should be said to be "too short for reaching" the obstruction; vertebral catheter instead of vertebral cater); 9- Finally, in previous descriptions SEMS are used in colon cancer as a temporary treatment before definitive surgery. In the case reported, it was used as a definitive palliative treatment, and while not mandatory, it would be of great scientific interest if the authors could provide medium- and long-term information on the patient follow-up.

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**Peer-review model:** Single blind

**Reviewer's code:** 06011774

**Position:** Peer Reviewer

**Academic degree:** MBBS

**Professional title:** Doctor

**Reviewer's Country/Territory:** Malaysia

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-06-26

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-07-02 10:03

**Reviewer performed review:** 2022-07-05 15:42

**Review time:** 3 Days and 5 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 checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	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

Thank you for the opportunity to review this informative article. I enjoyed reading it and I hope my comments would aid you in improving the research article.

- Title :** Suggest to expand the abbreviation DSA and state in the list of abbreviations (not completed). Also suggest to use the universally accepted terms for SEMS – expandable/expanding.
- Introduction :** despite mentioning several times in abstract that this is the first reported case of stenting in proximal bowel, this has indeed been written in several articles. One article even mentioned stenting done at T1. Suggest to omit or write as “few studies” (reference : DOI: 10.29271/jcpsp.2019.12.S89 and 10.1155/2012/296347)
- Case presentation :** Many important pertinent history and clinical examination findings were not included. (e.g. family history, constitutional symptoms, any colonoscopy/biopsy etc.). Why was this patient planned for palliative care? Did CT staging revealed any mets? Any oncology referral? Was it the patient’s wish? Despite the age of 88 years old, ECOG status should be stated to support the decision for palliative care.
- Discussion :** suggest to summarize as it is unnecessary to describe again what was done. Instead, previous studies documenting outcomes with statistical data to support the good outcomes of such procedure would be much more valuable. (eg. Post op death avoided, period of immobilization or length of hospital stay comparing stenting and surgery. etc.)
- Conclusion?** Maybe the last paragraph of the discussion can be used as the conclusion.
- language used** is acceptable with some minor corrections to be made (eg vertebral catheter -->catheter)

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 06011774

**Position:** Peer Reviewer

**Academic degree:** MBBS

**Professional title:** Doctor

**Reviewer's Country/Territory:** Malaysia

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-06-26

**Reviewer chosen by:** Ji-Hong Liu

**Reviewer accepted review:** 2022-08-29 13:17

**Reviewer performed review:** 2022-09-01 06:10

**Review time:** 2 Days and 16 Hours

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
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**

Thank you for the revised manuscript. As most of the comments have been addressed based on your article, I have no further comments to make. Thank you.