

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 79576

Title: Impact of central venous port implantation method and access choice on outcomes

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03814201

Position: Editorial Board

Academic degree: PhD

Professional title: Associate Professor, Senior Researcher

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2022-09-23

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-18 01:26

Reviewer performed review: 2022-10-28 11:53

Review time: 10 Days and 10 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 Grade E: Do not publish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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
<https://www.wjgnet.com>

statements

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

SPECIFIC COMMENTS TO AUTHORS

I have reviewed with pleasure your paper and it seems to me a good work. I have no objection or comment to it.

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Manuscript NO: 79576

Title: Impact of central venous port implantation method and access choice on outcomes

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03414030

Position: Editorial Board

Academic degree: FICS, MD, PhD

Professional title: Deputy Director, Full Professor, Postdoc, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2022-09-23

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-21 14:32

Reviewer performed review: 2022-10-31 12:38

Review time: 9 Days and 22 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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

In current study, two methods of central venous port implantation (via jugular veins vs. via subclavian veins) were compared. The authors got the results that complication rate of the jugular vein route was lower than subclavian vein approach. Then authors draw the conclusion that jugular vein route is a safer method for central venous port implantation. The study design was rigorous, and clinical picture data was detailed; however, the paper contains several statistical, grammatical and syntactic errors. I have several questions as below: 1. We do recognize that jugular veins route seems to be a safer alternative to the subclavian vein approach with lower risks of total major mechanical complications, according to a recent meta-analysis which include twelve studies including 3905 patients published between 2008 and 2015. Then, the innovating points and the purposes of current study need to be better stated in the introduction section. Reference: Wu S, Huang J, Jiang Z, et al. Internal jugular vein versus subclavian vein as the percutaneous insertion site for totally implantable venous access devices: a meta-analysis of comparative studies. BMC Cancer. 2016;16(1):747. Published 2016 Sep 22. doi:10.1186/s12885-016-2791-2 2. Were the operation of these two methods performed by doctor with same operative experience? I think this need to be clearly stated in the method section to reduce the selection bias. 3. Applying tests to the categorical variables is less straightforward than the authors have assumed. P-value calculated by pearson χ^2 test is not the most appropriate statistical value to use for 2x2 tables when numbers of the positive cases were too limited. For example, regarding the catheter occlusion, zero occlusion occur in Group 1, and four occlusions occur in Group 1, then the significance should better be calculated with Fisher's exact test, and the authors will see that the p-values currently used in the paper for categorical data will all

increase. 4. Regarding the infection, the authors claim that infection developed in 1 patient in Group 1 and 3 patients in Group 2. But the question here is: whether the infections occurred in these two groups were all catheter related. I think that's important, then one case of superficial surgical site infection should not be enrolled in the final analysis, and the statistical significance should be recalculated. 5. Regarding the catheter rupture, we notice that one linear complete separation was identified in 1 patient in the group. The authors should provide additional information, including the timing between catheter fracture and angiographic intervention, the secondary injury and whether catheter occlusion have occurred before and if so, how the event were treated? 6. The authors give us hints that the intravascular and extravascular catheter angle above 60 degrees was the reason for the occurrence of the catheter rupture. We were cautious about this view. Could it possibly be the results of the pinch-off syndrome? 7. The authors dedicate a significant portion of the discussion section about the ports washing. They advocate a longer 2-month interval for port care and washing. I think that port care and washing method should also be stated in the methodological section. 8. The authors might want to provide information on the catheter-related thrombotic complications. It might be the main reason of catheter occlusion. 9. The operation process of the jugular vein puncture and port placement was too verbose, and it needs clear explanation and concise presentation. 10. In the method section, what does this sentence mean? "Patients were hospitalized in the same-day surgery unit", it better corrected as "Patients were hospitalized in the same day-surgery unit" ?

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Manuscript NO: 79576

Title: Impact of central venous port implantation method and access choice on outcomes

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05664543

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2022-09-23

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-27 20:39

Reviewer performed review: 2022-11-04 02:18

Review time: 7 Days and 5 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
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Their results robustly confirm that the jugular vein route is safer than the subclavian vein approach for central venous port implantation. It is interesting for others, however, something needs be revised, such as language, table, it is not clear to be understood.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: Impact of central venous port implantation method and access choice on outcomes

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Peer-review model: Single blind

Reviewer's code: 03414030

Position: Editorial Board

Academic degree: FICS, MD, PhD

Professional title: Deputy Director, Full Professor, Postdoc, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2022-09-23

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-11-26 00:10

Reviewer performed review: 2022-11-26 00:49

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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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

SPECIFIC COMMENTS TO AUTHORS

it better corrected as “Patients were hospitalized in the same day-surgery unit” .
Acceptable to me.