

## PEER-REVIEW REPORT

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

**Manuscript NO:** 79688

**Title:** Is fascial closure required for a 12-mm trocar? A comparative study on trocar site hernia with long-term follow up

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

**Peer-review model:** Single blind

**Reviewer's code:** 04164271

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2022-09-02

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-09-03 02:03

**Reviewer performed review:** 2022-09-11 05:55

**Review time:** 8 Days and 3 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" 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 Grade E: Do not publish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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Peer-reviewer  
statements**

Peer-Review: [ ☒ ] Anonymous [ ☐ ] Onymous

Conflicts-of-Interest: [ ☐ ] Yes [ ☒ ] No

#### **SPECIFIC COMMENTS TO AUTHORS**

Thank you for giving me an opportunity to review this paper. This is an interesting manuscript titled " Is fascial closure required for a 12-mm trocar? A comparative study on trocar site hernia with long-term follow up. " I enjoyed reading this paper on a familiar question of everyday clinical practice. I have several questions and concerns regarding the study. 1) Do the authors conclude from the results obtained that routine closure is not necessary? I do not understand the authors' thinking. 2) Is it possible to prove non-inferiority in this number of cases with an incidence of 1.1%? 3) It is stated that the closed group had lower postoperative pain than the non-closed group. Isn't it the other way around?

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

**Peer-review model:** Single blind

**Reviewer's code:** 06140653

**Position:** Peer Reviewer

**Academic degree:** MBBS

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-09-02

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-09-14 04:50

**Reviewer performed review:** 2022-09-20 15:38

**Review time:** 6 Days and 10 Hours

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 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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<b>Peer-reviewer statements</b>	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**

Please consider minor upgradation of the English language. The utility and adopted protocol for cross sectional imaging needs further elaboration. Apart from cases of colon cancer for which a specific protocol is adopted for follow up the utility of cross sectional imaging in follow up and screening for diagnosing tracer site hernias needs to be deliberated upon. Current literature still supports routine closure of all tracer sites > 10 mm. Routine closure of non midline, non bladed tracer sites can be optional but whether it can be totally omitted needs to be further debated upon.

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**Provenance and peer review:** Invited 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:** Thailand

**Manuscript submission date:** 2022-09-02

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

**Reviewer accepted review:** 2022-10-04 03:06

**Reviewer performed review:** 2022-10-16 03:50

**Review time:** 12 Days

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 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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	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 authors report a retrospective study on the outcomes of fascial closure after laparoscopic surgery. The manuscript is generally well-written and concise. However, some aspects must be addressed by the authors. While there was no statistical significance in the occurrence of trocar site hernias (TSH) between the two groups, there were no cases of TSH in the closure group; some consideration must be given to the possibility that the sample size was insufficient to detect possible benefits from the closure. The manuscript does not mention if there was some form of allocation criteria for the patients to be included in either group, which is important as this could be a significant source of biases. Another possible source of bias that should be acknowledged is that different closure techniques were used, according to surgeon preference.