



## PEER-REVIEW REPORT

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

**Manuscript NO:** 69590

**Title:** Local random flaps for cervical circumferential defect or tracheoesophageal fistula reconstruction after failed gastric pull-up: Two case reports

**Reviewer's code:** 03887212

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor

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

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

**Manuscript submission date:** 2021-07-10

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-15 12:07

**Reviewer performed review:** 2021-07-18 17:27

**Review time:** 3 Days and 5 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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**

I have appreciated the way in which these cases have been treated and I congratulate with the authors for the good results. Still, improvements are needed. Figures are self-explanatory and very informative. My remarks are: 1) The word epinephelos (line 127 and 137) may not be the most appropriate word. 2) In imaging examination CT scan is not mentioned in both cases. I believe that it was mandatory in the first and recommended in the second to exclude possible fluid collection in the mediastinum and in the pleural cavity and to achieve the best assessment of the neck. 3) At first re-operation, in both cases, it would be appreciated if the authors could specify the surgical approach. 4) There are other many English inaccuracies. For instance line 192 not "ago" but earlier..... 5) The first sentence of conclusion should be delete or changed (lines 346-8). It is obvious that the surgeons must do it. 6) The technique reported has shown good results in these two cases but I would be very prudent in suggesting its use in all the cases in which the gastric necrosis extends below the thoracic inlet. Please change the last sentence of conclusion.