

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 68827

Title: Inguinal endometriosis: Ten case reports and review of literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02524412

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2021-06-22

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2021-08-02 17:17

Reviewer performed review: 2021-08-02 23:42

Review time: 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	 [] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

This is a significant case series reporting a pathology (endometriosis) that is very prevalent in women of reproductive age, but with a very rare presentation (intestinal endometriosis). However, before being published, the text needs to be modified at several points. First, it is important to add some recent references (PMID: 33983554, 33832157, 33653321, 32963875 and 32637884). Second, I think that the conclusion is too long in the abstract and the core tip is too short (too succinct). The authors need to check the keywords, according to the MESH website. Third, the abbreviation should be followed along the text. In a search throughout the manuscript, it is noted that the terms that were already abbreviated at the beginning of the text are repeated, such as endometriosis (EM), inguinal hernia (IH). Third, the introduction should emphasize the subject that will be discussed throughout the manuscript. The case presentation is good, no further comments. Note that there is a need for a space (line 102) before the word "Furthermore". Please double check if, in line 110, the correct is "Ten", instead of "10". I would suggest replacing line 110 for the following sentence: Ten cases of IEM patients were included into the case report, and they werediagnosed through surgery and pathology, of which 4 were nulliparous women. line 118: "There "instead of "there", with "T". Line 138, please exclude ")". Line 158, please insert a space after "was performed". The authors need to better describe whether or not they performed laparoscopy in all cases. Line 166-7: the authors commented about the recurrence and the follow up. However they repeated about the recurrence and the follow in line 172. Please, explain why or exclude them. Note thar inguinal hernia (line 172, should be IH). The major problem of the manuscript is the discussion. The whole first paragraph (from line 178 to 190) should be excluded. This paragraph is meaningless (insignificant). The authors



should focus, in the discussion, on the strength of the work, that is, on describing the IEM, which is rare and what should be done when this pathology is suspected. The authors failed in this point. The main focus of the discussion is in lines 238 and 239: General surgeons tended to focus on the IH andignore the presence of IEM, leading to preoperative misdiagnosis. That is the point!!!. And it would be important to explain the surgical approach in those cases (including the laparoscopy).Line 236-37 - please check if the author's name is missing. I do recommend excluding lines 274-277. Finally, the references should be revised. Reference 4 is incomplete. References 14, 15, 22, 25 and 16 the authors repeated the year of study publication. Some of the references are without DOI or PMID (31, 32, 41, 42,43). Why include reference 28 (too old - please explain). The legend of table 1 needs correction. In addition, they don't need to mention in the table "parous", because they mention the percentage of nulliparous.



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Academic degree: MD, PhD

Professional title: Doctor, Postdoctoral Fellow, Research Fellow, Surgeon, Surgical

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Reviewer's Country/Territory: Italy

Author's Country/Territory: China

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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	 [] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
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Re-review	[]Yes [Y]No



Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Manuscript revision: "Inguinal endometriosis: Report of ten cases and literature review" The article deals with an interesting, although rare, topic, about the management from diagnosis to treatment of inguinal endometriosis. The study design is well structured and a literature review is associated with the report of a small case series. The English is good and the Discussion session is well structured and clearly explains the better management of this rare disease. I appreciated the opportunity to review this very nice paper and I truly think the paper deserves to be published. Accepted