

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3270

Title: Transanal Natural Orifice Specimen Extraction for laparoscopic low/ultralow anterior resection in rectal cancer

Reviewer code: 00503618

Science editor: Gou, Su-Xin

Date sent for review: 2013-04-18 17:15

Date reviewed: 2013-04-21 05:52

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|----------------------------------------------|----------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Grade A (Excellent) | <input type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input type="checkbox"/> Accept |
| <input type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

The article describes an interesting innovation in surgical technique. there are a few recommendations that would enhance the article's suitability for publication in the World Journal of Gastroenterology: 1. Grammar and spelling needs to be corrected. 2. For patients with incomplete margins of resection, what was done for these patients? Did they have further resection? What was their outcome? 3. Diagrams of the placement of the pursestring sutures and mechanical stapler would enhance the technical usefulness of this paper.

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Name of Journal: World Journal of Gastroenterology

Ms: 3270

Title: Transanal Natural Orifice Specimen Extraction for laparoscopic low/ultralow anterior resection in rectal cancer

Reviewer code: 02441703

Science editor: Gou, Su-Xin

Date sent for review: 2013-04-18 17:15

Date reviewed: 2013-04-23 10:18

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|----------------------------------------------|----------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Grade A (Excellent) | <input type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input type="checkbox"/> Accept |
| <input type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

Thank you for your contribution to the filed of laparoscopic rectal cancer surgery. I recommend you to revise several points in you article. 1) The introduction is too tedopis. would you focus on the purpose of your study. 2) You used inadequate capital letters, please correct these letters. 3) I think you don't need figure F. 4) Please describe the cases of neoadjuvant chemoradiation therapy among your cases. 5) I think you don't need to explain the NOTES in introduction & discussion.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3270

Title: Transanal Natural Orifice Specimen Extraction for laparoscopic low/ultralow anterior resection in rectal cancer

Reviewer code: 00058269

Science editor: Gou, Su-Xin

Date sent for review: 2013-04-18 17:15

Date reviewed: 2013-04-23 14:30

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|----------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Grade A (Excellent) | <input type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input type="checkbox"/> Accept |
| <input type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input checked="" type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input checked="" type="checkbox"/> Rejection |
| <input checked="" type="checkbox"/> Grade D (Fair) | | BPG Search: | |
| <input type="checkbox"/> Grade E (Poor) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Minor revision |
| | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

Authors reported their experience of transanal specimen extraction following laparoscopic TME in small series of 21 patients. This technique is not novel and was presented and discussed before. Comments: 1. Preoperative tumor staging should be presented. Tumor height from the anus before and after CRT. 2. How many patients had preoperative CRT? What was response to CRT? Why patients were operated 2 weeks after CRT? Please discuss this point. 3. What means nearly complete TME in 3 cases? 4. Mean operative time, blood loss and mean tumor diameter are different in results and Table 1. 5. How did you protect the region of specimen retrieval? 6. Please provide more information regarding case of anastomotic leak. Did he have ileostomy? Height and type of anastomosis(hand sewn or mechanical)? 7. What was postoperative management of these patients? Fast track? What were criteria to start meal after the surgery? 8. What was mean follow up time after the surgery? 9. English revision is needed 10. This paper can be interested more in surgical than gastroenterological audience.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3270

Title: Transanal Natural Orifice Specimen Extraction for laparoscopic low/ultralow anterior resection in rectal cancer

Reviewer code: 00505564

Science editor: Gou, Su-Xin

Date sent for review: 2013-04-18 17:15

Date reviewed: 2013-04-25 03:03

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|----------------------------------------------|----------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Grade A (Excellent) | <input type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input type="checkbox"/> Accept |
| <input type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

This manuscript is interesting and highly innovative in colorectal surgical technique especially more in surgical than gastroenterological audience. Here are few recommendations to improve the paper. 1) There is a need of English structure and grammar revision. 2) Please include pre-operative size/stage of tumors studied. 3) In material and methods you mentioned that patients with T4 tumor were excluded in the study and yet in the results such patients underwent postoperative chemotherapy. Please elaborate. 5) Why in all your patients diverting loop ileostomy closure done six months after the operation? Is this standard or were there complications?