

## ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 3578

**Title:** Gastrojejunostomy in patients with unresectable pancreatic head cancer- the use of Roux loop significantly shortens the hospital length of stay.

**Reviewer code:** 00058121

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-07 10:40

**Date reviewed:** 2013-05-15 00:42

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 checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" 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

-The present study could potentially be an interesting one, should authors had followed the right way of reporting RCT's according to the CONSORT statement. -Randomization is not reported. In which way authors allocated treatment groups? Was the assessment blinded? Primary and secondary outcomes are not clearly stated. -A flow chart of the different stages of the study is not provided -Power analysis for sample size (in each of the outcomes) does not exist to justify authors' results -Authors concluded that "Roux gastroenterostomy decreases DGE, reduces LOS and associated health care costs". Healthcare costs can be estimated after a long term follow up. -There is no follow-up reported. Since the end of the study 12/20011 there is enough time to follow these patients. How many of them underwent an intervention for stent occlusion? ERCP in patients with a Roux-en-Y gastroenterostomy is expected to fail in greater percentages than conventional gastroenterostomy, which means that an operation or a Percutaneous drainage is needed. This increases costs and deteriorates patient's quality of life.