

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6005

Title: Topic Highlight. Evidence based medicine and surgical approaches for colon cancer: evidences, benefits and limitation of the laparoscopic vs open resection

Reviewer code: 01209464

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-30 14:21

Date reviewed: 2013-10-02 01:07

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 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

Well-written. Drop the word, "conventional" regarding open surgery. Laparoscopy has been conventional for years.

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6005

Title: Topic Highlight. Evidence based medicine and surgical approaches for colon cancer: evidences, benefits and limitation of the laparoscopic vs open resection

Reviewer code: 00057798

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-30 14:21

Date reviewed: 2013-11-04 02:36

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" 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 checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a comprehensive review and meta-analysis of laparoscopic vs open colectomy for colon cancer. The authors reviewed 33 articles for meta-analysis. They report benefit less EBL, earlier bowel recovery, shorter LOS, and less morbidity in the laparoscopic group. The study is carefully performed by an experienced group and several concerns should be addressed: 1. The authors should explain how this paper is different from multiple meta-analysis studies already published. 2. The PRISMA design in Figure 1 indicates manual search of 6 papers, but the 39 articles increased to 48 articles. Should this be 8 papers for manual review? 3. The data and discussion should be expanded post-op hernia and morbidity in general between the groups since this is the most interesting aspect. Specifically which morbidity factors were favored in the lap group (Infection?)