

**ESPS Peer-review Report****Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 10327**Title:** A modified delta-shaped gastroduodenostomy in totally laparoscopic distal gastrectomy for gastric cancer**Reviewer code:** 00503623**Science editor:** Yuan Qi**Date sent for review:** 2014-03-27 14:33**Date reviewed:** 2014-03-31 22:40

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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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 MS, ESPS, No. 10327, provides insightful and well illustrated review as to the safety and feasibility of a modified delta-shaped gastroduodenostomy (DSG) in totally laparoscopic gastrectomy (TLDG). Based on the experience with 63 gastric cancer patients undergoing TLDG with DS, the conclusion is that modified DSG is technically safe and feasible, with acceptable surgical outcome. This is well written and quite instructive work. Congratulations !

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10327

**Title:** A modified delta-shaped gastroduodenostomy in totally laparoscopic distal gastrectomy for gastric cancer

**Reviewer code:** 02929151

**Science editor:** Yuan Qi

**Date sent for review:** 2014-03-27 14:33

**Date reviewed:** 2014-04-14 23:38

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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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 was performed to evaluate the safety and feasibility of a modified delta-shaped gastroduodenostomy (DSG) in totally laparoscopic distal gastrectomy (TLDG), compared with conventional DSG. The conclusion was that modified DSG was technically safe and feasible, with easier process to shorten anastomosis time and acceptable surgical outcomes. Although it is novel, there are some questions as follows: ① Whether the complete resection of duodenal cutting edge might increase anastomotic tension in modified delta-shaped gastroduodenostomy? ② The anastomosis time was significantly shorter in the modified DSG than in the conventional DSG, what is the reasons?