

ESPS Peer-review Report**Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 11024**Title:** Development of Minimally Invasive Techniques for Management of Medically-Complicated Obesity**Reviewer code:** 02444743**Science editor:** Su-Xin Gou**Date sent for review:** 2014-04-30 18:13**Date reviewed:** 2014-05-08 12:03

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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	<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 authors introduce the historical and current actuality of bariatric surgery for morbid obesity. This is a well-prepared review. Major comment, The gut microbiota may be changed after bariatric surgery, do the changed gut microbiota contribute to weight loss? Minor comment 1. Page 8, Line 11, VGB should be VBG. 2. Page 10, peptide YY should be replaced by PYY in text except in title, because the abbreviation of PYY is given in Page 9. 3. FDA appears in Page 18, but Food and Drug Administration appear in Page 19?

ESPS Peer-review Report**Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 11024**Title:** Development of Minimally Invasive Techniques for Management of Medically-Complicated Obesity**Reviewer code:** 01404215**Science editor:** Su-Xin Gou**Date sent for review:** 2014-04-30 18:13**Date reviewed:** 2014-05-08 20:10

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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	<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 authors have produced an excellent review on minimally invasive techniques for management of complicated obesity. This is a very honest study, as they show a deep knowledge on basic surgical techniques for management of obesity, and also endoscopic and endolumenal interventions offering potential advantages for patients suffering of morbid obesity. Moreover, the manuscript is nicely written and edited.

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11024

Title: Development of Minimally Invasive Techniques for Management of Medically-Complicated Obesity

Reviewer code: 02861239

Science editor: Su-Xin Gou

Date sent for review: 2014-04-30 18:13

Date reviewed: 2014-05-14 08:52

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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 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)	<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 manuscript titled "Development of Minimally Invasive Techniques for Management of Medically-Complicated Obesity" and authored by Farzin Rashti and others, proposes an interesting and a complete overview to the bariatric surgery and its transition to safer and more minimally invasive procedures designed to induce weight loss. Overall the study is well written highlighting several techniques and their strengths and limitations. Due to increased pandemic of obesity and increase population of patients undergo to bariatric surgery, topic is timely, relevant to the clinics and also to the gastrointestinal research. Comments: 1. Adipokines such as leptin and adiponectin regulate long-term changes in appetite, whereas short-term effects are signalled by insulin acting on the hypothalamus. Please give short information about the leptin and adiponectin related to their alterations after bariatric surgery. 2. Please provide reference for: "From 1980 to 2008, the global trend has shown a rapid increase in the mean body mass index (BMI; weight in kilograms divided by the square of height in meters) by a rate of 0.4 kg/m² per decade." 3. Please provide reference for: "Approximately 146,000 bariatric surgeries were performed worldwide in 2003." 4. In page 5, the term of "Adjustable gastric banding (AGB) is currently the second most common bariatric surgical procedure; however, it is becoming less favored" is mentioned. Could you please give a very short explanation/reason why it is getting less favored? Also in the same page, you mentioned appetite reduction? This is very general term; could you explain/link it to the later explanation you have provided for the possible reasons of appetite reduction in the text? 5. This part is confusing, please re-work on it: "Rouxen-Y gastric bypass (RYGB) continues to be the most commonly performed



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bariatricsurgery worldwide, including the USA/Canada, Europe, and Latin/South America. Adjustable gastric banding (AGB) is currently the second most common bariatric surgical procedure; however, it is becoming less favored. There has been a major upward trend in the number of vertical sleeve gastrectomy (SG) surgeries performed in 2011, while the overall number of RYGB and AGB declined in comparison to 2008.[22]" I suggest to start describe it from the most common and latter continues to less common or vice-versa. 6. In the figure, they should be in order from more common to less common and also use their short term in the picture. For example: Rouxen-Y gastric bypass (RYGB). 7. FDA is written in page 18, while "Food and Drug Administration" is written in page 19 and 23. 8. "Aspiration Therapy" as a title is not bold in page 28.