



**ESPS Peer-review Report**

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

**ESPS Manuscript NO:** 6912

**Title:** Evolution and Future of Laparoscopic Colorectal Surgery

**Reviewer code:** 00112273

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

**Date sent for review:** 2013-10-31 11:47

**Date reviewed:** 2013-12-23 21:19

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 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	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

Manuscript number: 6912 Comments on manuscript with titel "The Evolution and future of laparoscopic Colorectal Surgery" In this manuscript the author gives a thorough overview of the evolution of laparoscopic colorectal surgery. Missed and Open Research opportunities 2. The author is questioning how much shorter laparoscopic procedures could be given the fact that hospital stay after open surgery is significantly reduced since the introduction of enhanced fast-track recovery protocols. In 2011, Vlug et al. published results from a randomised controlled trail comparing open and laparoscopisc with or without enhanced recovery program in the Ann Surg, (Laparoscopy in combination with fast track multimodal management is the bast perioperative strategy in patients undergoing colonic surgery: a randomized clinical trial (LAFA-study). Hospital stay could be reduced to a median of 5 days after laparoscopy in combination with FAST track protocol. Perhaps the author could take this into account. Another point I would like to adres is the need for conversion. Various rates of conversion has been published. The author doesn't mention this subject in his manuscript. Conversion deminish the "short-term"-advances of laparoscopy. The author doesn't mention the problems around conversion. Better outcomes can be obtained when the conversion rate could be decreased. The author may adres the topic conversions. The Future 1. However, the bulkiness of the machine as such, the fact that the surgeon's assistants at the table only see a 2-dimensional image, the cost and some recent data from other specialities : please add reference



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**Title:** Evolution and Future of Laparoscopic Colorectal Surgery

**Reviewer code:** 00555281

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

**Date sent for review:** 2013-10-31 11:47

**Date reviewed:** 2013-12-24 09:07

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 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	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

This review article entitled “The evolution and future of laparoscopic colorectal surgery” gives an overview of the history and development of the technique as well as indicates issues and perspective for more advanced technology in the future including single port surgery and robotic surgery. With regard to the “missed or open research opportunities”, since the indication of the laparoscopic surgery has been changed with the development of the device, it is indispensable to discuss about the development of the device including auto-suture and energy device. The author summarized the research opportunities and the future, although the significance of the tissue specimen being retrieved from cancer region will not change in the future due to the heterogeneity of the morphology and genetic feature of the cancer. The information from the primary tumor will be more necessary when the recurrence occurred and individualized chemotherapy is planned. Therefore, it is not appropriate to comment the method of retrieving specimen by homogenizing in situ or by removing with the suction device even as a scientific fiction.