

**ESPS Peer-review Report****Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 7175**Title:** Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?**Reviewer code:** 00055273**Science editor:** Ya-Juan Ma**Date sent for review:** 2013-11-07 18:01**Date reviewed:** 2013-12-10 06:24

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 authors present a non—systematic review on the laparoscopic treatment of meckel diverticulum in children. Although the topic is interesting and the manuscript well written, I have two comments in order to improve the text: 1) even though the disease is more common in infants, I am sure the current literature in the laparoscopic treatment of meckel's in adults may add experience applicable to children. The references are limited to the pediatric population. 2) the review does not include much practical points,i.e., pearls to help the reader to perform this operation. The manuscript simply showed the feasibility of the operation.

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 7175

**Title:** Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?

**Reviewer code:** 00069379

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2013-11-07 18:01

**Date reviewed:** 2014-01-22 18:57

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

## COMMENTS TO AUTHORS

Comments to the Author Please see my review points about the manuscript titled "Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?" This article needs to be revised because of the following reasons: 1. The article contains large amount of linguistic mistakes and to long, complicated sentences which are quite hardly to understand especially for non-native speakers. So this paper must be supervised by a native speaker. For example: Page 5: "A high index of suspicion is required in children with acute abdomen" "There was increasing case reports published since then." "Additional 5 mm ports were inserted and left and right...." "Because of the small size of umbilicus in a child, a 2-3cm umbilical incision at the umbilicus may be unsightly. However, this drawback is offset in children with Meckel's diverticulum." "Reports with the aims focused on the experience of SILS[29,30], or the use of SILS in segmental small bowel resection or in the management of obscure gastrointestinal bleeding in children[ 27,28]. Although in SILS, specially designed instruments including flexible laparoscope or instrument were developed to facilitate the operation, in reported cases of SILS in Meckel's diverticulum, the use of conventional laparoscopic instruments were adopted by all authors[27-30]." "One of the concerns in total laparoscopic intracorporeally diverticulectomy was failure to perform segmental resection." "Intraoperative complication after laparoscopic assisted diverticulectomy was never reported in literature. Parsad et al[12] reported 8% on intestinal obstruction after the operation." "Laparoscopy has emerged as an important tool in the diagnosis and management of children with Meckel's diverticulum in children." "Figure 3. Single incision laparoscopic surgery setup. Three ports were inserted over the same fascial plane" 2. It would be better to use only the expression "single incision laparoscopic surgery" but " single site



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laparoscopic surgery". 3. The reader expects some summarised opinion or statement in the conclusion based on the experience of the referred articles. It could be stated from the point of view of financial or experimental reasons also. For example the extracorporeal resection is much cheaper and more common used, or the postoperative complication rate is lower in the case of the usage of linear staplers etc. There is no any clear statement in association with the praeoperative investigation of Meckel diverticula which would increase the level of this article. A table about the management of the praeoperative investigations would be a good step to make this article more interesting

**ESPS Peer-review Report**

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

**ESPS Manuscript NO:** 7175

**Title:** Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?

**Reviewer code:** 00068052

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2013-11-07 18:01

**Date reviewed:** 2014-01-24 17:49

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 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**

none

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 7175

**Title:** Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?

**Reviewer code:** 02551692

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2013-11-07 18:01

**Date reviewed:** 2014-01-26 16:44

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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input checked="" 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

Thank you for submitting your manuscript entitled "Laparoscopic excision of Meckel's diverticulum in children: What is the current evidence?" to the World Journal of Gastroenterology. The manuscript is not a systematic review of Literature but a simple description of the laparoscopic treatment of Meckel diverticulum in children. The topic could be interesting but the Authors didn't report statistical data that can confirm "the current evidence". Moreover, they didn't report neither the number of patients who are considered in the study nor the results of their experience. The paper is only an ordinary description of the Meckel's diverticulum treatments that are already known in Literature. The conclusions of work can't be accepted because they are not supported by statistical tests.