

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11000

Title: Emergency laparoscopic partial splenectomy for ruptured spleen: A case report

Reviewer code: 02455208

Science editor: Su-Xin Gou

Date sent for review: 2014-04-29 18:54

Date reviewed: 2014-04-30 20:38

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)		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

Review Report ESPS Manuscript NO: 11000 Title: Emergency laparoscopic partial splenectomy for ruptured spleen: A case report Laparoscopic partial splenectomy in blunt abdominal trauma is an interesting approach when indicated. However, the abundance of proposed techniques for spleen preservation is indicative of the fact that there is no “golden rule” for such situation. The method has been previously reported, but still it is of interest as not many cases can be found in bibliography. The manuscript is written in fluent English, easy to comprehend. SPECIFIC COMMENTS Apparently the author is a skillful laparoscopic surgeon. The question is how emergency a case is when a splenectomy lasts for 150 min and the total blood loss is 200ml. That said, one could consider that a non-operative management could be successful. However, I would expect a more detailed description of the hemodynamic/transfusion status of the patient, as this is the primary determinative factor of the strategy should be followed. Furthermore, from the (low-quality indeed) CT scan image, one can say that there is no iv-contrast, which is very important in order to diagnose an active arterial bleeding. In page 3, authors say that the trocar distribution is shown in Fig 1, but Fig. 1 is actually a CT scan image.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11000

Title: Emergency laparoscopic partial splenectomy for ruptured spleen: A case report

Reviewer code: 02504712

Science editor: Su-Xin Gou

Date sent for review: 2014-04-29 18:54

Date reviewed: 2014-05-04 17:57

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

Comment on the Manuscript Emergency laparoscopic Partial Splenectomy for Ruptured Spleen: A Case Report The manuscript describes a Case Report on the emergency management of a ruptured spleen from blunt trauma using laparoscopic partial splenectomy. In general, this is a single case report and its merits are the emergency management by partial splenectomy. In addition, the authors provide selection criteria for the choice of laparoscopic partial splenectomy in the emergency situation. These seem to be the policy of the local department and not supported by the literature or an objective study. This should be mentioned specifically in the text. The manuscript is well written and readable but it is too long for a case report and could be condensed in order to focus on the main points and make these clear to the readership. A review of the literature would have been a valuable input into this case report. The title is appropriate and reflects the topic and content of the study. The abstract is clear and gives a clear delineation of the case. The case report is largely satisfactory, clear and brief. The Discussion is too long and ventures into areas out with the remit of the case report. There are a few points which the authors may consider revising: 1. Figure 1 referred to in the case report is of the trocars distribution. However, the supplied figure 1 is a CT showing extensive haemoperitoneum. 2. The authors provide selection criteria for the choice of laparoscopic partial splenectomy in the emergency situation. These seem to be the policy of the local department and not supported by the literature or an objective study. This should be mentioned specifically in the text. 3. A proper formal review of the literature would add to the importance of this manuscript. References in this manuscript are appropriate and relevant. In summary, this is a satisfactory case report pending the corrections above. It should be revised to improve the quality



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of the manuscript.

ESPS Peer-review Report**Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 11000**Title:** Emergency laparoscopic partial splenectomy for ruptured spleen: A case report**Reviewer code:** 00070261**Science editor:** Su-Xin Gou**Date sent for review:** 2014-04-29 18:54**Date reviewed:** 2014-05-05 13:06

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

COMMENTS TO AUTHORS

This is an interesting case report on ruptured spleen successfully treated by laparoscopic partial splenectomy. The manuscript is well written and is likely to be of interest to readers of WJG. I have only minor comments. 1. The patient underwent emergency surgery following ineffective conservative treatment. However, the authors say that hemodynamic stabilization is needed during laparoscopic splenectomy for ruptured spleen. Indeed intraoperative blood loss of 200mL is small and such condition is not life-threatening. Please give detailed information about indications for emergency surgery of the patient. 2. Contrast in Fig.1 CT image should be corrected. 3. Figures showing trocars distribution cannot be found in the paper.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11000

Title: Emergency laparoscopic partial splenectomy for ruptured spleen: A case report

Reviewer code: 00057983

Science editor: Su-Xin Gou

Date sent for review: 2014-04-29 18:54

Date reviewed: 2014-05-05 18:12

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
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<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

1.In CASE REPORT paragraph, only abdominal CT is noted in Fig. 1 instead of the trocars distribution. This mistake should be revised. Besides, the sizes or types of trocars should be mentioned. 2.What were the vital signs of this patient when arrival at emergency room? 3.What was the grade of American Society of Anesthesiologists (ASA) scale of this patient? 4.What position was the patient put during operation? 5.During operation, was the raw surface of spleen noted only with oozing or just covered with blood clot? If there was no active bleeding, was it possible to preserve the whole spleen even without partial splenectomy by using some special material (e.g. Parenchyma-Set, Splenic capping, omentum patch or even using Tissue glue)? 6.About the blood loss of 200 ml, was the blood amount of auto-transfusion detected? 7.Could you please describe a detailed suggestion about the indication and contraindication of this technique? I think this is very useful for other surgeons to select the patients when facing the same condition.

ESPS Peer-review Report**Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 11000**Title:** Emergency laparoscopic partial splenectomy for ruptured spleen: A case report**Reviewer code:** 00722715**Science editor:** Su-Xin Gou**Date sent for review:** 2014-04-29 18:54**Date reviewed:** 2014-05-14 03:28

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
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<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 case presentation is fine and well written. But you need to describe more about the interesting points and new findings you have reached in this case.