

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4967

**Title:** Intravenous iron supplementation may be superior to observation in acute isovolemic anemia

**Reviewer code:** 02456377

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-06 21:27

**Date reviewed:** 2013-08-09 09:30

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 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"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

This retrospective analysis was conducted to determine whether the postoperative use of IV-iron for acute severe isovolemic post-gastrectomy anemia in patients not requiring urgent transfusion may be effective. This study enrolled 63 patients with IV-iron sucrose treatment and 60 patients without treatment. Then the authors observed the Hb levels for a period of time. As a consequence, Hb-level in the iron-group increased more rapidly than in the observation group. In conclusion, IV-iron supplementation might be an effective treatment for postoperative isovolemic post-gastrectomy anemia and appears to be a better alternative than clinical observation. However, we have some questions should be resolved.

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4967

**Title:** Intravenous iron supplementation may be superior to observation in acute isovolemic anemia

**Reviewer code:** 00070915

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-06 21:27

**Date reviewed:** 2013-08-09 16:01

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

## COMMENTS TO AUTHORS

In this retrospective study, IV iron supplementation is compared to observation in patients with acute postoperative isovolemic anemia. After a 12-month observation period, the authors reported a more rapid increase in Hb level in patients receiving IV iron and concluded that this may be superior to observation alone. I have the following comments: 1. The Hb level of <9.0g/dl is rather arbitrary and should be supported by appropriate literature. 2. How many of the 123 patients reached the 12g/dl target? 3. What was the duration of the IV iron treatment? Were all the patients of the IV iron group treated for the full 12 months or was the treatment discontinued when the target was achieved? 4. Significant differences in pre-op Hb level, cancer stage and adjuvant therapy are important bias issues that should have been dealt with during patient selection. 5. As stated in the title, the conclusion that IV iron “may” be superior provides the study with fairly weak significance. Additionally, if the postoperative complications are not different and the quality of life and survival benefit are not assessed it is doubtful whether the more rapid increase in Fe levels alone is worthy of a rather prolonged IV iron treatment. 6. Minor grammatical errors should be addressed.

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4967

**Title:** Intravenous iron supplementation may be superior to observation in acute isovolemic anemia

**Reviewer code:** 00502831

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-06 21:27

**Date reviewed:** 2013-08-12 07:39

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

## COMMENTS TO AUTHORS

The authors performed retrospective study about determination whether application of post-operative intravenous iron for acute isovolemic anemia after gastrectomy for cancer may be effective. They concluded that intravenous iron supplementation may be an effective treatment for post-operative isovolemic post-gastrectomy anemia and may be a better alternative than observation. So far, there are few studies about application of intravenous iron for acute isovolemic after gastrectomy. So this retrospective study for the large amount of patients is an important. But I have some questions as bellow. 1) This study had various stage from stage I to IV. The authors should show the data of the effect of intravenous iron in same stage. 2) Were there efficacy of sex and age on the data? 3) How the difference of the effect of intravenous iron between distal gastrectomy and total gastrectomy? 4) This study lacks the preoperative state about Hb, and Ht. 5) The authors should showed the data of Fe, ferritin, UIBC or TIBC in the serum of patients on pretreatment and after treatment. 6) How is the observation group cases which increased Hb-level? On the contrary, how is the iron group cases which did not increase Hb-level? 7) Table 5 demonstrates no significant difference between the two groups with respect to surgical complication and non-surgical complication. However in p7, on line 10, 11, the authors write "The iron-group had more non-surgical complications than the observation group (30.2% and 11.7%, respectively;  $p=0.012$ )."

What do you mean about this paragraph? 8) The authors showed only 10.5% of the patients in the observation group developed chronic anemia at 12 months post-operatively. How is the patients who need the intravenous iron treatment after gastrectomy?

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4967

**Title:** Intravenous iron supplementation may be superior to observation in acute isovolemic anemia

**Reviewer code:** 00505502

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-06 21:27

**Date reviewed:** 2013-08-22 13:24

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

## COMMENTS TO AUTHORS

**【Comment to the authors】** The manuscript entitled 'Intravenous iron supplementation may be superior to observation in acute isovolemic anemia' by Young-Woo Kim et al. In this study, Hb-level in the iron group increased more rapidly than in the observation group, and there were no significant differences between the two groups with respect to complications and no adverse events related to iron application. The authors concluded that intravenous iron supplementation may be an effective treatment for post-operative isovolemic post-gastrectomy anemia and may be a better alternative than observation. The manuscript is concise and well-organized. However, this manuscript seemed lack several important points. Therefore, I suggest some major revision to their manuscript. The authors should address the points listed below. Comments 1. In this manuscript, the authors defined the target Hb-level was considered 12.0 g/dl in the materials and methods section. The authors should present the clear reason for this matter. 2. Although the serum iron, ferritin, and TIBC levels are seemed to be very important for this analysis, the manuscript lacked these data. The authors should address the intention of IV-iron administration for acute isovolemic anemia. Only 'based on clinical experience' is too confusing. 3. The authors are advised to show the duration of iron-administration. 4. Was the IV-iron administration done only during hospitalization? In these patients, wasn't the oral administration of iron done after discharge from hospital? 5. It would be interesting to clarify the relation between the cumulative dose of iron administration and the increase of Hb-levels.