

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 15149

**Title:** Mesopancreas: a boundless structure, namely the rationale for dissection of the paraaortic area in pancreaticoduodenectomy for pancreatic head carcinoma.

**Reviewer's code:** 02544727

**Reviewer's country:** Greece

**Science editor:** Jing Yu

**Date sent for review:** 2014-11-12 11:56

**Date reviewed:** 2014-11-24 20:04

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input checked="" type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Available information shows that extended lymphadenectomy during pancreaticoduodenectomy for adenocarcinoma of the pancreatic head does not associate with better survival. However, in the first paragraph of the manuscript the authors should add information, if available, regarding the effect of extended lymphadenectomy on local recurrence rate. This is relevant to their suggestion that extension of the mesopancreatic dissection to the paraaortic area might minimize the likelihood of an R1 resection and therefore, early local recurrence.