

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13391

Title: Transvaginal Cholecystectomy versus Conventional Laparoscopic Cholecystectomy for Gallbladder Disease: A Meta-Analysis

Reviewer code: 02552068

Science editor: Jing Yu

Date sent for review: 2014-08-21 15:56

Date reviewed: 2014-10-04 20:36

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The work is well ideated, written and organized. The statistical analysis seems good. However, I would change the the discussion and the conclusion a little bit. For example, I would emphasize the need of additional organ injury to the vagina rather than a general non-inferiority results. Tha main core of the article is condvisibile.

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Title: Transvaginal Cholecystectomy versus Conventional Laparoscopic Cholecystectomy for Gallbladder Disease: A Meta-Analysis

Reviewer code: 02823069

Science editor: Jing Yu

Date sent for review: 2014-08-21 15:56

Date reviewed: 2014-10-15 02:08

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

1) The statement "many prior studies" is used without reference in several places including the first line of the third paragraph. Please add references to those statements or eliminate them. 2) Under material and methods in inclusion and exclusion criteria number 6 states that when two studies were published from one institution/author then the one of higher quality was chosen. Please provide the criteria used to determine "higher quality". 3) Under material and methods in data extraction it's stated that differences between the two reviewers were resolved by consensus. Consensus of who? The two reviewers or a larger group? 4) Under results it is stated that 972 articles were excluded after "scanning titles and abstracts". Please provide more information on what was seen in the titles or abstracts to lead to exclusion. 5) In the Bulian et al papers that were "combined" were you able to avoid reusing the same data point twice? That is were you able to determine if any of the data points were used in both articles and use it only once in your analysis? 6) Under results in the demographic region please provide the data for ASA instead of stating there was no difference alone. 7) Please provide the number of mortalities found with the CLC group. 8) Please explain why the patient's partner's perception of the procedure is important to consider or remove information about it. While sexual dysfunction is certainly a concern well addressed here the partner's opinion of the surgery is of very little concern compared to the patient herself. If this is seen as a barrier to the procedure please explain it further. 9) Avoid making opinion statements in

the discussion section. For instances the sentence “some surgeons preferred to choose rigid instruments instead of flexible endoscope” adds nothing to the discussion and makes it sound opinionated. 10) In the discussion section reference to animal studies should be limited. While they certainly have severed to evolve the technique and are appropriate in the introduction as such, they do not help analysis in the discussion given it’s a human meta-analysis. 11) Numerous grammatical errors are present through out the paper. A few examples are listed below, however, all mistakes could not be included. Having the primary team work with a native English speaker for further corrections should be considered a. Line two of introduction “ as a new surgical potential next paradigm shift” is awkwardly phrased and should be reworded b. Second paragraph line 4 “Recent years, transvaginal cholecystectomy...” should read “In recent years...” c. Second paragraph introduction “...while still needing future researches to approve.” Should read “... while still needing future reach to establish.” d. First line of third paragraph of the introduction. “To date, many prior studies have reported experience of TVC...” Should read “To date, many prior studies have reported experience with TVC.” e. These are just some of the corrections needed on the first page. Again the mistakes are minor grammatical errors but so numerous it detracts from the scientific message. Complete grammatical rewrite is needed.