

ESPS PEER-REVIEW REPORT

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Title: Long-term oncologic outcomes of laparoscopic versus open surgery for stage II and III rectal cancer

Reviewer's code: 02906811

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Science editor: Yuan Qi

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

COMMENTS TO AUTHORS

In this paper, the authors conducted a retrospective cohort study to evaluate long-term oncologic outcomes of LRR for stage II and III rectal cancer in Chinese population. The paper was written basically in accordance with the recommendations of the STROBE (Strengthening the Reporting of Observational Studies in Epidemiology) Statement. However, I have several concerns as follow: 1 It would be better to indicate the study's design in the title or the abstract. The title of this paper can be revised as "Long-term oncologic outcomes of laparoscopic versus open surgery for stage II and III rectal cancer : a retrospective cohort study" for example. 2 The innovation in this paper is to evaluate long-term oncologic outcomes of LRR for stage II and III rectal cancer. While, in abstract section, the novel findings related to long-term oncologic outcomes and stage II and stage III rectal cancer have not been described. 3 It is better to present the standard deviation of age and the minimum and maximum age of the participants. 4 The issue that the authors were concerned about in this paper had been discussed in other papers. As the authors described in introduction section, there were many retrospective cohort studies providing different long-term oncologic outcomes between laparoscopic



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and open surgery for stage II and stage III rectal cancer. Moreover, meta-analysis on this issue have also been performed. So, the authors should give the reasons of performing this investigation in introduction section. In discussion section, the authors should give the interpretation of their novel results compared to those in previous retrospective cohort studies.