

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31846

Title: Minimally invasive surgery for gastric cancer: a comparison between Robotic, Laparoscopic and open surgery

Reviewer's code: 00068348

Reviewer's country: Greece

Science editor: Ya-Juan Ma

Date sent for review: 2016-12-26 14:51

Date reviewed: 2016-12-30 15:10

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

COMMENTS TO AUTHORS

The article deals with a comparison between the surgical treatment options for gastric cancer. The whole set up of this retrospective study is very good. The variables chosen for evaluation provide usefull information. The study included a large number of patients. My opinion is for distal gastrectomy all the three methods are applicable with similar outcomes but for subtotal or total gastrectomy the open surgery is the gold standard. Also if the fast track postoperative recovery is followed there is no statistical significant difference in the hospital stay between open and laparoscopic surgery. The robotic surgery is available only in a few centers, the cost is very high and regarding D2 lymphadenectomy is not suuperior to laparoscopic or to open approach.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31846

Title: Minimally invasive surgery for gastric cancer: a comparison between Robotic, Laparoscopic and open surgery

Reviewer's code: 03251521

Reviewer's country: China

Science editor: Ya-Juan Ma

Date sent for review: 2016-12-26 14:51

Date reviewed: 2017-01-02 21:28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" 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 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

The authors compared three methods of surgery technique for gastric cancer, robotic, laparoscopic and open approach. There is some questions need to be clarified. First of all, were all the subjects randomly distributed to each group? How were they done? Secondly, how did you choose the type of reconstruction? Before they allocated to each group, or after? Thirdly, there is a large proportion of Roux-en-Y E-J reconstruction in the Open group, please explain why?

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31846

Title: Minimally invasive surgery for gastric cancer: a comparison between Robotic, Laparoscopic and open surgery

Reviewer's code: 00253974

Reviewer's country: Germany

Science editor: Ya-Juan Ma

Date sent for review: 2016-12-26 14:51

Date reviewed: 2017-01-04 20:13

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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 checked="" 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

The authors compared open to laparoscopic and robotic surgery for gastrectomy in gastric cancer using a retrospective approach. A high number of patients was included. the retrospective non-randomised a approach is a major limitation for this study and should be discussed as such. What is the new impact of this study apart from the confirmation of well known facts such as reduction of hospital stay by minimally invasive surgery? The authors should comment on this.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31846

Title: Minimally invasive surgery for gastric cancer: a comparison between Robotic, Laparoscopic and open surgery

Reviewer's code: 00579619

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2016-12-26 14:51

Date reviewed: 2017-01-06 15:13

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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 checked="" 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

This multi-institutional retrospective study including many patients showed minimally invasive (laparoscopic or robotic) gastrectomy had an advantage of less blood loss, earlier recovery and oral intake, and shorter hospital stay, as compared with open gastrectomy. These outcomes were similar to many previous studies. In this study, open gastrectomy included higher rate of total gastrectomies than minimally invasive gastrectomies did, and the difference have must impact on outcomes. Therefore, I recommended that patients should be matched by the propensity score, or they should be limited in total or distal gastrectomy.