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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 75178

Title: Single-incision laparoscopic surgery to treat hepatopancreatobiliary cancer: A

technical review

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06116960 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-01-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-17 17:51

Reviewer performed review: 2022-01-24 05:13

Review time: 6 Days and 11 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is a minireview concentrated in technical aspects of Single-incision laparoscopic surgery or SILS applied in hepatopancreatobiliary (HPB) diseases, especially in malignant diseases. This is a trending field in recent following years. The article was well-written with good, illustrated figures. However, the review concentrated too much on introducing laparoscopic instruments and contained only comparing short-term outcomes. Maybe, It's more helpful if authors introduced more details of technique step-by-steps and how to overcome challenging maneuvers, as well as summarize oncological outcomes (primary results like number of lymph nodes resected, rate of positive margins, and secondary results like one-year recurrence rate, free-progressive survival, overall survival,...)



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Reviewer's code: 05378552 Position: Peer Reviewer Academic degree: MSc

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-01-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-03 08:29

Reviewer performed review: 2022-02-03 13:34

Review time: 5 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This paper mainly describes the application of Single-incision laparoscopic technology in hepatobiliary and pancreatic surgery, and shares the surgical experience of author's team with us in the form of pictures and texts. It is a review worthy of promotion and has certain innovation and clinical value. However, the following points are worth discussing. Please inform the author in an appropriate form. Thank you! 1. Although Single-incision laparoscopy has many advantages, its disadvantages are still controversial, such as the safety of surgery, the radical cure rate of lesions and the convenience of operation. For operations such as cholecystectomy, Single-incision laparoscopy does not have many problems, but for major operations such as hemihepatectomy, partial pancreatectomy and biliary tract resection, whether Single-incision laparoscopy is really as safe as described by the author, especially for the control and treatment of intraoperative bleeding. So we expect more cases and their prognosis. 2. It is suggested that the author increase the short-term and long-term efficacy of Single-incision laparoscopic technique in the literature review, because the treatment without talking about the efficacy is a failure. 3. Pictures also need to be processed by professionals. 4. The language needs further modification.