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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 80198

Title: Obstructive and secretory complications of diverting ileostomy

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06332646 Position: Peer Reviewer Academic degree: MD

Professional title: Attending Doctor, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: Japan

Manuscript submission date: 2022-09-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-11 01:09

Reviewer performed review: 2022-10-19 10:16

Review time: 8 Days and 9 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] 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	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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

SPECIFIC COMMENTS TO AUTHORS

Summarizing the article: The study aims to review the two major complication types associated with diverting ileostomy, obstructive complications and secretory complications. It focuses on the etiology, diagnosis, as well as management, and prevention of said complications. Due to the review nature of the study, no original hypothesis or new findings were noted, as appropriate. what is the importance of this manuscript? The manuscript provides an overview with details focused on the topic of interest and presents the available findings in a concise manner. Conclusions summarize the findings accurately. Especially, the manuscript describes in details, the various prevention approaches currently being tested. What are the limitations of the study and its findings? There are some limitations that are inherent to the type of the article, as it is limited to review, and due to lack of clarity regarding which articles were reviewed, literature search criteria, etc., for readers, it becomes unclear how recent the review literature is without looking at the references. Specifying the limitations and clarifying the review selection will provide further value to the manuscript. Again could be based on the nature of the type of manuscript itself if accepting the restrictions.



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Reviewer's code: 05455405 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Associate Professor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Russia

Author's Country/Territory: Japan

Manuscript submission date: 2022-09-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-13 10:18

Reviewer performed review: 2022-10-19 20:23

Review time: 6 Days and 10 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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
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SPECIFIC COMMENTS TO AUTHORS

Dear editors and authors of the manuscript "Obstructive and secretory complications of diverting ileostomy" The topic of the review is relevant, because it is devoted to the complications of surgery, which is in itself a method of preventing complications of surgical treatment of colon diseases. The data is selected by the authors at a good level. The scientific style and grammar are well presented. However, it should be noted that the authors aim to describe two big problems of diverting ileostomy in this manuscript. Both ileostomy obstruction and electrolyte depletion may be separate areas for study. Perhaps it would be more expedient to divide this manuscript, since the perception of the material and attention to the text of the manuscript is dispersed and its scientific value decreases. The review also includes generalized tables, while some points require interpretation and specification, for example, anatomical features of the patient (length of the mesentery of the intestine, thickness of the anterior abdominal wall and rectus muscles, exhaustion of the patient, local features of the ileum), general systemic disorders are indicated as risk factors for complications. The authors do not provide absolute values of these parameters and methods of managing them. The manuscript will be of interest to clinicians, while the revision of the presented material and correction of data are required.