



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57659

Title: Partial pancreatic tail preserving subtotal pancreatectomy for pancreatic cancer: improving glycemic control and quality of life without compromising oncological outcomes

Reviewer’s code: 00003940

Position: Editorial Board

Academic degree: FRCS (Gen Surg), MD

Professional title: Emeritus Professor, Surgeon

Reviewer’s Country/Territory: Australia

Author’s Country/Territory: China

Manuscript submission date: 2020-06-30

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2020-08-30 01:33

Reviewer performed review: 2020-08-30 02:20

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

SPECIFIC COMMENTS TO AUTHORS

This is a very detailed study of the comparison of TP with partial pancreatic resection for PDAC. It is not a randomised study but the number of cases undergoing TP allows for good comparison of the two groups. It is interesting that the important issues on poor control of glycaemic outcome is significantly poorer than for partial pancreatic resection although this is not as severe as some would have expected. There were no deaths related to this issue. The other important issue is long term recurrence in the PP group. It is surprising to me that there were no more recurrences in this group. Recurrence can occur because of cells infiltrating posteriorly but more likely because of multicentricity of the cancer. I thin a statement maing this issue more evident should be made for the importance of follow-up.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57659

Title: Partial pancreatic tail preserving subtotal pancreatectomy for pancreatic cancer: improving glycemic control and quality of life without compromising oncological outcomes

Reviewer's code: 00183279

Position: Editorial Board

Academic degree: MD

Professional title: Director, Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2020-06-30

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2020-08-24 02:06

Reviewer performed review: 2020-09-02 04:43

Review time: 9 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

SPECIFIC COMMENTS TO AUTHORS

Pancreatic cancer is a leading cancer of the gastrointestinal system and still carries a dismal prognosis. A good number of patients are no more suitable for resection at time of diagnosis due to early development of distant metastases or major infiltration to adjacent structures. However, due to persistent efforts for curative resection represents the only therapy with a potential for cure. For the surgical treatment of pancreatic head cancer, the classical Whipple operation is still the standard procedure but during the last two decades, pylorus preserving duodenopancreatectomy has been evolved as a more conservative procedure in order to omit the consequences of partial gastrectomy. For cancer of the pancreatic body and tail, distal pancreatectomy or total pancreatectomy represent the current standard treatment. More radical methods like regional pancreatectomy and resection with extended lymph node dissection have failed so far to demonstrate any improvements in long-term survival compared to the standard types of resections. Recent studies have demonstrated that total pancreatectomy is considered safe, with similar mortality and morbidity rates as compared to Partial resections. There are increasing reports of organ sparing resections with lower incidence of complications like exocrine and endocrine functions and similar oncological benefits like with major organ radical resections. This is a good effort in this direction which the authors have put forth. I suggest the following for improvement: Describe in a table comparing the indications for TP and PPTP-SP. How was the selection made for the groups, avoiding bias factors. Was the same team of surgeons involved in both the groups. Defining the Clinical and Histological AJCC classifications in the material and methods section more clearly. The text needs shortening in the introduction and technique sections. The language needs improvement in all sections



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 57659

Title: Partial pancreatic tail preserving subtotal pancreatectomy for pancreatic cancer: improving glycemic control and quality of life without compromising oncological outcomes

Reviewer's code: 00183279

Position: Editorial Board

Academic degree: MD

Professional title: Director, Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2020-06-30

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2020-10-09 04:51

Reviewer performed review: 2020-10-10 02:52

Review time: 22 Hours

Scientific quality	<input checked="" type="checkbox"/> Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous [] Onymous Conflicts-of-Interest: [] Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Article can be Accepted for publication