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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 65492

Title: Association of anastomotic leakage with long-term oncologic outcomes of patients

with esophagogastric junction cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03033812

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Japan

Manuscript submission date: 2021-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-16 02:10

Reviewer performed review: 2021-04-16 13:29

Review time: 11 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



Baishideng **Publishing**

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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This group from Japan present a retrospective series of EGJ tumors to evaluate the influence of anastomotic leak on survival. 122 patients were studied and anegative correlation between survival and leak was found for cases with an intrathoracic anastomosis but not for cervical anastomosis. The topic is interesting and a good number of patients have been studied; however, some data is missing in order to understand the results: 1) There is no info on how the anastomosis where performed. Same technique irrespective of the reconstruction method and level? 2) There is no info if leaks are activelly searched (routine tests) or only based on clinical suspicion. 3) I got lost during the description of what the authors called "transhiatal approach". Is it a total gastrectomy with extension to the distal esophagus and reconstruction with the jejunum??? One point must be discussed in order to understand the results: 1) Thoracic anastomotic leak was associated to decreased survival AND larger tumors. Can the lower survival be attributted only to staging and anastomotic leak is an Minor comments: 1) et al. not et al 2) Readers are probably more epiphenomenon? used to the Siewert classification for EGJ tumors. The authors should mention and probably compared both classifications.



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RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 65492

Title: Association of anastomotic leakage with long-term oncologic outcomes of patients with esophagogastric junction cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03033812

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Japan

Manuscript submission date: 2021-03-25

Reviewer chosen by: Han Zhang (Online Science Editor)

Reviewer accepted review: 2021-09-17 17:03

Reviewer performed review: 2021-09-17 17:08

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

The authors addressed well all comments.