

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 80375

Title: Short- and long-term outcomes of laparoscopic vs open surgery for T2 gallbladder cancer: A systematic review and meta-analysis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03079551

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-09-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-25 12:57

Reviewer performed review: 2022-09-27 00:58

Review time: 1 Day and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

The authors systematically reviewed the short-term and long-term outcomes of laparoscopic surgery (LS) versus open surgery (OS) for T2 gallbladder cancer (GBC). A meta-analysis based on the two groups found that the long-term outcomes of LS for T2 GBC are similar to those of OS, but LS is superior to OS in terms of operative time, intraoperative bleeding, and postoperative hospital stay. The article had specific clinical research value. However, the article's content was insufficient, and many substantive problems need to be solved. My detailed comments are as follows: Abstract Methods: It is suggested to supplement the selection of relevant outcome indicators and the risk of the bias assessment method. Results: It is suggested to add a statistical symbol to indicate the statistical difference between the two groups and the corresponding confidence interval. Materials and Methods If the article is registered on PROSPERO in advance as required, please provide the CRD number, or according to the protocol implementation, the article will be explained accordingly. Search Strategy: It is suggested to supplement the start date of literature retrieval and retrieval strategy. Inclusion criteria: "(ii) Intervention:" should introduce the intervention method, and the type of study should be presented separately. "(vi) Outcomes:" should be divided into primary outcome measures and secondary outcome measures Results "Figure 1 Flow Diagram": The exclusion process should be kept on the same side. "1. Search results and study selection": Some statements in the text are inconsistent with the content. It is recommended that the author check the relevant content for errata. Following: "These 5 publications involved 5 studies from Japan and 4 studies from South Korea." "The clinical characteristics of the two groups in the included studies are presented in Table 2."



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“3. Sensitivity analysis and publication bias” The number of studies is 5, whether the funnel plot is applicable. Discussion It is suggested to point out the existing bias and analyze the existing bias

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Position: Peer Reviewer

Academic degree: PhD

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Reviewer's Country/Territory: Iran

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Review time: 8 Days and 7 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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous
	Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No

SPECIFIC COMMENTS TO AUTHORS

The manuscript by Zhang et al. provided new systematic review on outcomes of laparoscopic versus open surgery for T2 gallbladder cancer. The review is conducted very well based on PRISMA guidelines. However, there are some minor issues before publication. 1. In abstract, the effectiveness of each operational method should be mention based on 1-RR. This method is very understandable for the readers. 2. In search strategy I could not find supplementary material showing the full search strategy in each data-base. 3. For quality assessment the authors used NOS and Cochrane tools which were the best way for this concern. However, the reference citation for this part is missed. Please cite the following references for this part: <https://doi.org/10.1002/jcsm.13043>, <https://doi.org/10.1093/ptj/pzab144>, <https://doi.org/10.1016/j.physio.2021.04.005>, 4. The number of included studies is too small for this meta-analysis, which should be mentioned at least in the limitation. 5. In statistical analysis, it is mentioned 'Heterogeneity was assessed using the chi-square test, with the significance level set at $P = 0.05$.' please cite the following citation for this part: <https://doi.org/10.1002/jmv.27996>