

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 86856

**Title:** Analysis of textbook outcomes for ampullary carcinoma patients following pancreaticoduodenectomy

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05226098

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Director, Professor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-07-11

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-26 08:01

**Reviewer performed review:** 2023-08-26 08:28

**Review time:** 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

#### SPECIFIC COMMENTS TO AUTHORS

This is an interesting paper showing evaluation of TO after PD for ampullary carcinoma. Please analyze which of the TO factors affected the outcome.

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**Reviewer's code:** 07047986

**Position:** Peer Reviewer

**Academic degree:** DNB, Doctor, MBBS, MS

**Professional title:** Doctor, Surgeon

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-07-11

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-12 04:24

**Reviewer performed review:** 2023-08-28 02:42

**Review time:** 15 Days and 22 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 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>Peer-reviewer statements</b>	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

It is good paper written on the experience of the authors in the management of ampullary carcinoma and they have compared the results in 2 different era and used the textbook outcomes to compare the results. It is a good number of cases for analysis of outcomes, however the number who achieved TO were small, still it was found to give a better oncological outcome in these patients. In the discussion there is a mention about this being the largest number of AC, which I think is incorrect and authors might want to do a literature search and correct the statement. The text outcome is a new bench mark for analysis of outcomes which not only includes the oncological outcomes but it also takes into consideration the morbidities. The complications could have been elaborated in the results. The discussion could mention about the other prognostic scores and markers which have already been studied and published in the past. This could bring the right perspective of the TO in the assessment of the outcome of AC. The references could include more of those studies also there are too many references on the other diagnosis and TO, instead the relevant ones could be mentioned. Overall, the paper is well written and brings out an area where TO has not described, however with revision and inclusion of relevant details could be published. Some Additional Ref's Sun S, He C, Wang J, Huang X, Wu J, Li S. The prognostic significance of inflammation-based scores in patients with ampullary carcinoma after pancreaticoduodenectomy. BMC Cancer. 2020 Oct 10;20(1):981. doi: 10.1186/s12885-020-07482-0. PMID: 33036573; PMCID: PMC7547453. Klein F, Jacob D, Bahra M, Pelzer U, Puhl G, Krannich A, Andreou A, Gül S, Guckelberger O. Prognostic factors for long-term survival in patients with ampullary carcinoma: the results of a 15-year observation period after pancreaticoduodenectomy.



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**Position:** Editorial Board

**Academic degree:** FRCS (Ed), MD, MS

**Professional title:** Professor

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** China

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**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-26 04:13

**Reviewer performed review:** 2023-08-30 05:00

**Review time:** 4 Days

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
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<b>Peer-reviewer statements</b>	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 authors have conducted research on the topic of ampullary tumors over a good number of years. So the number of case studied is satisfying. A total of 272 AC patients met the focus criteria. TO was authenticated in 66 (24.3%) patients. R0 resection (99.6%), no 30-day readmission or mortality (93.0%) and no ICU treatment (90.1%) were observed without difficulty.  $\geq 12$  lymph nodes examined (58.5%) and no postoperative complications (48.9%) were not easy to achieve. It is firmly documented that ampullary carcinoma have distinctly better long-term survival than patients with pancreatic adenocarcinoma. This strongly depends on lymphatic and vessel involvement. and also preoperative an elevated CA 19-9 can be a significant prognostic factor. The authors have produced good results and need to be encouraged to continue such a study for further indicators which will have implication on the long term survival. This may include the histological origin and also type of tumor and mucin secretion. The statistical work needs to be seen by an expert and also there is some under result section which needs to be place under material methods.