

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 81722

Title: Xanthogranulomatous inflammation requiring small bowel anastomosis revision:
A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06239395

Position: Peer Reviewer

Academic degree: Doctor

Professional title: Associate Professor, Deputy Director

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-11-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-30 00:58

Reviewer performed review: 2022-11-30 15:34

Review time: 14 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 Grade E: Do not publish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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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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

SPECIFIC COMMENTS TO AUTHORS

Dear Author's, I was pleased to review your manuscript and i think that the subject is interesting. In order to improve your manuscript i adress the following comments:1.Case presentation and history is complex.2.Postoperatively, the patient' s series of examinations did not give specific data, nor did the follow-up survey, and the specific situation of the patient was not known.3.The discussion part was inadequate.

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Reviewer's code: 03600768

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Israel

Author's Country/Territory: United States

Manuscript submission date: 2022-11-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-20 07:03

Reviewer performed review: 2022-12-20 08:56

Review time: 1 Hour

Scientific quality	<input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Very good <input type="radio"/> Grade C: Good <input type="radio"/> Grade D: Fair <input type="radio"/> Grade E: Do not publish
Language quality	<input checked="" type="radio"/> Grade A: Priority publishing <input type="radio"/> Grade B: Minor language polishing <input type="radio"/> Grade C: A great deal of language polishing <input type="radio"/> Grade D: Rejection
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	Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No

SPECIFIC COMMENTS TO AUTHORS

I congratulate the authors for their interesting and very well written case report, with elaborate discussion regarding possible pathophysiology. This is a very rare case, however it is important to publish, as we occasionally come across such patients in whom the correct diagnosis and treatment might have been missed. My only suggestions are: 1. to mention how long is your follow-up after the last operation 2. to emphasize in your abstract that the patient had a "futile" diagnostic laparoscopy before the definitive treatment. 3. Conclusions: add that repeated pain and obstructive symptoms may necessitate revision of anastomosis for definitive diagnosis and clinical resolution