

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 84960

Title: Initial Suction Drainage Decreases Severe Postoperative Complications after

Pancreatic Trauma: A Cohort Study

Provenance and peer review: Invited 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: 2023-04-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-05-05 06:08

Reviewer performed review: 2023-05-05 06:53

Review time: 1 Hour

	[] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[Y] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No scientific significance
Language quality	[] Grade A: Priority publishing [Y] 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
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting paper. Please add the drainage period for both groups. Please elaborate on why primary NPI drainage has a lower postoperative complication rate than PG drainage.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00189260 Position: Editorial Board Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Czech Republic

Author's Country/Territory: China

Manuscript submission date: 2023-04-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-05-07 06:25

Reviewer performed review: 2023-05-15 17:33

Review time: 8 Days and 11 Hours

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
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Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting work with a relatively large cohort of patients dealing with the issue of postoperative pancreatic complications in traumatized patients. Nevertheless, I have a few comments on the text. Method Similar to Table 1, 5 grades of pancreatic injury are mentioned, but it is not stated which classification the division is based on. ...When necessary, a pig tail catheter was placed...What was the indication for performing CT-drainage, possibly another (additional) procedure, and in how many patients was CT-drainage performed? ... We regularly replaced the catheter... Does this mean that the catheter was replaced regardless of its functionality, i.e., even with continued high waste? Did catheter blockage occur in any case (another potential advantage of active drainage might just be a lower risk of catheter blockage). Results ... The NPI group had less duodenum injury and more concomitant vascular injury...According to table 1 there was less vascular injury. Discussion Another limitation is the lack of evaluation of the influence of other therapeutic procedures (especially CT-drainage). This is not necessarily a significant limitation, given that it is not stated in how many patients this occurred.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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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: 2023-04-28

Reviewer chosen by: Cong Lin

Reviewer accepted review: 2023-05-31 11:19

Reviewer performed review: 2023-05-31 11:46

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	[] Grade A: Priority publishing [Y] 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



statements

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

SPECIFIC COMMENTS TO AUTHORS

No additional comments.