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# PEER-REVIEW REPORT

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

Manuscript NO: 85145

**Title:** Intraoperative pancreas stump perfusion assessment during pancreaticoduodenectomy: A systematic scoping review

Provenance and peer review: Invited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 06179533

Position: Peer Reviewer

Academic degree: MSc

Professional title: Associate Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: United Kingdom

Manuscript submission date: 2023-04-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-04-14 00:01

Reviewer performed review: 2023-04-16 11:51

Review time: 2 Days and 11 Hours

	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No creativity or innovation</li> </ul>
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Scientific significance of the conclusion in this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No scientific significance</li> </ul>
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) [Y] Minor revision [ ] 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

The authors detailly examined an interesting issue. They justified the inclusion criteria effectively, rhe organization of the manuscript is sufficient and all the references are relevant. I congratulate the authors for such anextensive work. As a minor suggestion, a core tip should be added.



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Title: Intraoperative pancreas stump perfusion assessment during

pancreaticoduodenectomy: A systematic scoping review

Provenance and peer review: Invited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 04721358

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: United Kingdom

Manuscript submission date: 2023-04-13

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-05-12 11:17

Reviewer performed review: 2023-05-15 10:34

Review time: 2 Days and 23 Hours

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] 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 this manuscript	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation
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Scientific significance of the conclusion in this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No scientific significance</li> </ul>
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

The topic of this manuscript is very interesting: the relationship between pancreas stump perfusion and pancreatic fuistula after pancreaticoduodenectomy. The Authors revised the English Literature and only 5 eligible studies were found totalling 156 patients. The definition of pancreatic fistula and the methods to assess pancreas stump perfusion were different in the studies. In conclusion, the current published evidence about pancreas perfusion and the impact of hypoperfusion on pancreatic fistula are not clear. Despite the limits of this study are consistent (as outlined by the Authors), Robertson and Coll. should be congratulated for the work related to an important, unresolved problem that requires further experiences.