

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 24496

Title: What operation for recurrent rectal prolapse after previous Delorme's procedure?
A practical reality

Reviewer's code: 03252939

Reviewer's country: Portugal

Science editor: Xue-Mei Gong

Date sent for review: 2016-01-25 15:14

Date reviewed: 2016-02-09 20:31

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Relevance of the topic Management of recurrent rectal prolapse is always a hot topic for colorectal surgeons. The title suggests that the authors' focus is clinical results from recurrent rectal prolapse treatment experience. However, the aim states that the authors want to report their experience in "primary and recurrent rectal prolapse". Methods should state clearly that it is a retrospective study (it is mentioned in the abstract, but not clearly mentioned in the methods section). "The median duration of follow up was" is a result... it should not be mentioned in the methods section, but in the results. Statistical analysis should state that non-parametric statistics methods were used, and why. This can be inferred from the use of medians. p is not capital P. Results: Words like "majority" or "approximately" should not be used. The authors need to be precise regarding the number of surgical mortality and morbidity. Were other variables tested as predictors of recurrence besides urgent or elective surgery? If not, this should be done. If so, it should be clearly mentioned that they were not statistically significant. It would be interesting to compare surgical morbidity and mortality between the first and the second procedure. The paper suggests that these results lead to



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the proposed algorithm. This is not true since surgical decision-making protocols cannot be established by retrospective non-multicentric studies. Also, the algorithm was not tested since it was not compared to different techniques in the same clinical situations (which is not the aim of this work). I suggest that the algorithm that the authors used for surgical decision should be mentioned in the methods section, explaining which was the technique selection for each patient.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 24496

Title: What operation for recurrent rectal prolapse after previous Delorme's procedure?
A practical reality

Reviewer's code: 03252972

Reviewer's country: Netherlands

Science editor: Xue-Mei Gong

Date sent for review: 2016-01-25 15:14

Date reviewed: 2016-03-20 14:35

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The authors reported their retrospective data regarding the Delorme's procedure, which is one of the interesting topics. The title of the manuscript is confusing. Why it is about "rectal prolapse after previous Delorme's procedure", while in the manuscript primary and recurrent cases are both included? Please verify what is exactly your target patient population. Also change either your title or methods accordingly. The limitation of this study is not sufficiently addressed in the manuscript. For example, this study is retrospective, which certainly influence the level of evidence of this study. This needs to be discussed. Also, there is no statistical comparison in this study due to its retrospective nature, which also influence the credibility of the results. Personally I don't think the authors may propose an algorithm based on the current data. I'm not sure whether it might fit the methods section more than the discussion section. Personally I am interested in the quality of life with the different procedures. It would be very interesting if they authors may have some data in this regard as well.

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Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 24496

Title: What operation for recurrent rectal prolapse after previous Delorme's procedure?
A practical reality

Reviewer's code: 03317017

Reviewer's country: China

Science editor: Xue-Mei Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Accept