

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Urology

ESPS Manuscript NO: 7907

Title: Laparoendoscopic single site, laparoscopic or open surgery for adrenal masses: selecting the optimal approach

Reviewer code: 00505495

Science editor: Song, Xiu-Xia

Date sent for review: 2013-12-07 14:44

Date reviewed: 2013-12-10 03:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The manuscript describes the different modality to manage adrenal mass.

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Urology

ESPS Manuscript NO: 7907

Title: Laparoendoscopic single site, laparoscopic or open surgery for adrenal masses: selecting the optimal approach

Reviewer code: 00220901

Science editor: Song, Xiu-Xia

Date sent for review: 2013-12-07 14:44

Date reviewed: 2013-12-29 23:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" 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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The manuscript entitled. "Laparoendoscopic single site, laparoscopic or open surgery for adrenal tumors: selecting the optimal approach" was well written and clinically relevant. The authors summarized literature data comprehensively and conclusions are usefully for daily clinical practice. I have a minor comment as follows. 1. On page 11, at first paragraph; the authors mentioned that MI-A is the surgical approach of choice for almost all benign adrenal tumors. However I could not find any literature data regarding the recurrence rates after MI-A? Could recurrence rates be higher (especially in cortisol-secreting adenomas and pheo) in MI-A when compared to other surgical modalities?

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Urology

ESPS Manuscript NO: 7907

Title: Laparoendoscopic single site, laparoscopic or open surgery for adrenal masses: selecting the optimal approach

Reviewer code: 00725137

Science editor: Song, Xiu-Xia

Date sent for review: 2013-12-07 14:44

Date reviewed: 2014-01-06 16:33

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

In the present invited contribution the authors focused on different surgical approaches for adrenalectomy. Basing on pertinent literature and personal experience they conclude that surgical approach should be tailored on the basis of patients and tumors characteristics and gave useful indications for decision making and daily clinical practice. Minor comments: 1. Page 8. Since this is a review article, when discussing bilateral adrenalectomy, the authors could discuss about the possibility RL-A offers to perform bilateral adrenalectomy with two surgical teams operating at the same time on the the two sides of the patient, potentially reducing operative time and surgical stress (Lombardi CP et al., Surgery. 2011 Feb;149(2):299-300 and/or Raffaelli M et al. World J Surg. 2013 Nov 19. [Epub ahead of print])

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Urology

ESPS Manuscript NO: 7907

Title: Laparoendoscopic single site, laparoscopic or open surgery for adrenal masses: selecting the optimal approach

Reviewer code: 00736564

Science editor: Song, Xiu-Xia

Date sent for review: 2013-12-07 14:44

Date reviewed: 2014-01-10 16:50

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Authors have written simple review article describing current trends in adrenal surgery. To make this article more valuable to our readers I would suggest writing a section which summarizes specifics of different hormonal diseases (pheochromocytoma, cushing syndrome) with recommendations or experience with different surgical approaches. Also in body habitus section it would be valuable to read some information/recommendation from experienced surgeons, which approach to use and why, what are intraoperative and postoperative specifics of morbidly obese patients, not just to state that "laparoscopic procedures might be preferable...". Please find, read, cite and implement data from some large published series by experienced surgeons. This would make article more valuable and our readers will gain more practical knowledge in which case to choose which surgical approach and to what intraoperative specifics to take care of to decrease morbidity.