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## PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

Manuscript NO: 89709

Title: BILLROTH II ANASTOMOSIS COMBINED WITH BROWN ANASTOMOSIS

REDUCE REFLUX GASTRITIS IN GASTRIC CANCER PATIENTS. RETROSPECTIVE

**STUDY** 

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05355947 Position: Peer Reviewer

Academic degree: MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Greece

Manuscript submission date: 2023-11-09

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-30 15:16

Reviewer performed review: 2023-12-07 14:19

**Review time:** 6 Days and 23 Hours

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	[ Y] Grade D: Fair [ ] Grade E: Do not publish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



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

## SPECIFIC COMMENTS TO AUTHORS

1. Many previous studies have proved the role of Billroth-II + Broun in improving postoperative complications such as alkaline reflux gastritis. Please clarify the innovation and research significance of this paper. 2. The sample size included in this paper is small, please increase the sample size. 3. The time span of included patients is large, and whether the progress of anastomosis skill has positive impact on the complications rate. 4. Please explain whether laparoscopic or open surgery has any effect on postoperative complications. 5. In Figure 1, why did the drainage volume of the Billroth-II group suddenly increase on the sixth day after surgery. 6. Table1 needs to be polished. 7. Please confirm whether there are differences in baseline data between the two groups and whether the differences have an impact on complication rate. 8. What is the meaning of Table2, please explain in the discussion. 9. Please list the specific P values in Table4.