



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 99675

Title: Feeding jejunostomy in post-gastrectomy nutrition management for gastric cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05755691

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer’s Country/Territory: China

Author’s Country/Territory: India

Manuscript submission date: 2024-07-27

Reviewer chosen by: Yu Bai

Reviewer accepted review: 2024-08-25 13:10

Reviewer performed review: 2024-08-31 14:31

Review time: 6 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The article offered a comprehensive discussion on the use of feeding jejunostomy as a method of nutritional support for patients undergoing upper gastrointestinal surgeries, particularly in the context of gastric cancer treatment. The article was well-structured, beginning with an overview of the problem – malnutrition following gastrectomy – and then proceeding to discuss the different nutritional support options, culminating in the recommendation for feeding jejunostomy. The inclusion of references, particularly those that support the discussion of nutritional guidelines and the effectiveness of jejunostomy, added credibility to the article. The cited studies provide a solid foundation for the claims made about the benefits of feeding jejunostomy. The article effectively highlighted the clinical importance of maintaining nutrition in patients undergoing gastrectomy, emphasizing how feeding jejunostomy can reduce complications and support recovery. Recommendations: 1. The article contains several grammatical errors and awkward phrasings that could detract from its professional tone. For instance, phrases like “Weight loss with malnutrition is the most important factor associated with gastric cancer” could be refined for clarity. Consider revising sentences to improve



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readability. 2. While the article discusses both nasojejunal tube feeding and feeding jejunostomy, it would benefit from a more detailed comparative analysis of these methods. Highlighting specific scenarios where one method might be preferred over the other could help readers better understand the decision-making process in clinical practice. 3. The conclusion succinctly summarizes the benefits of feeding jejunostomy, but it could be expanded to include a brief discussion of potential future research directions or considerations for clinical practice. 4. Although the article touches on patient tolerability, it could delve deeper into the patient experience, including potential psychological impacts of long-term feeding methods and strategies to mitigate discomfort. Overall, the article is a valuable contribution to the discussion on post-operative care for gastric cancer patients. With some revisions to improve clarity, grammar, and depth of analysis, it has the potential to be a highly informative and practical resource for clinicians dealing with malnutrition in this patient population.