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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9860

Title: Haemorrhoidectomy – Making sense of the surgical options.

Reviewer code: 00068250

Science editor: Ya-Juan Ma

Date sent for review: 2014-03-01 20:51

Date reviewed: 2014-03-02 16:16

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input 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

1 The basis and significance of the surgical classification should be described for clinical application.

2 The section of “Pathophysiology of hemorrhoids” is too short. The authors need to describe in detail the course of development of the disease to prove their theory and opinion. Differentiation from other anal diseases should also be given.

3 Citation of references is inadequate. In the section of “Surgical options for hemorrhoids” no references is cited. It is not likely that all the issues are the authors’ opinion.

4 Apart from surgery, other treatment of hemorrhoids including conservative ones needs to be presented. Patients need to be educated to prevent post operative relapse.

5 Please correct typo and edit errors. Grammatical and punctuation errors exist.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9860

Title: Haemorrhoidectomy – Making sense of the surgical options.

Reviewer code: 00068273

Science editor: Ya-Juan Ma

Date sent for review: 2014-03-01 20:51

Date reviewed: 2014-03-19 20:50

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

COMMENTS TO AUTHORS

COMMENT The Author makes a critical revision of the many surgical options described for the management of the haemorrhoids. The article is clear and well organized. It has also the merit of indicating which should be the appropriate surgical choice for different degrees of the disease. The final message is to tailor the type of surgery to the grade of the haemorrhoids and also to adopt conservative measures when prolapse is absent. Some minor criticisms are the following: 1) The initials of the tables should be specify at the bottom of the table for a better comprehension by the reader; 2) Some references are missing in the paper; 3) The possibility to perform surgery without hospitalization and/or only with a local anesthesia could be emphasized in the paper and in the tables, 4) The prospective randomized trials comparing DGHAL with SH which are recently published should be indicated and made object of a comment (Teo JY et al. Int J Colorectal Dis 2010, 25: 1385; Festen S et al. Int J Coloproct Dis 2009, 24: 1401)



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9860

Title: Haemorrhoidectomy – Making sense of the surgical options.

Reviewer code: 02735072

Science editor: Ya-Juan Ma

Date sent for review: 2014-03-01 20:51

Date reviewed: 2014-04-04 00:13

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

Dear author(s), My review has as follows: -Title: needs to be more analytical (but not too lengthy) in order to represent more accurately the article’s content and endpoints. -Methods: this part is missing; a paragraph should be added reporting which databases were searched and for which time period, type of articles (eg reviews, meta-analyses, RCTs, guidelines, etc), keywords used, in which languages, and whatever else relevant. -Surgical options: add a table for grade II haemorrhoids, similar to tables for grade III and IV. The following data should desirably be added: incidence/prevalence of grade II haemorrhoids which need surgery, predisposing factors which lead to surgery, signs and symptoms which help in the decision-making process for surgery. -References: adequate number of them. However, only two references from 2013 and one from 2014 have been included in the reference list. Authors should also search the literature for some interesting articles which were published recently, such as 'Dis Colon Rectum. 2014 Mar;57(3):348-53', as well as other RCTs from 2013/2014.