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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9896

Title: Surgical treatment of Ulcerative colitis. Ileorectal vs. Ileal pouch anal anastomosis. Current

evidence.

Reviewer code: 00068472 **Science editor:** Gou, Su-Xin

Date sent for review: 2014-03-03 17:41

Date reviewed: 2014-03-05 17:34

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[] High priority for
[Y] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[Y] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

The authors review and compare the results of surgical treatment with ileo-rectal anastomosis (IRA) and ileal pouch-anal anastomosis (IPAA) of ulcerative colitis, discussing postoperative morbidity, mortality, surgical failure rates, functional outcomes and rectal cancer risk. Special comments? The authors should discuss in more detail the clear-cut indications of both ileo-rectal anastomosis (IRA) and ileal pouch-anal anastomosis (IPAA) procedures. ? The authors should spend more time to discuss the cancer risk after both procedures. There is an apparent discrepancy regarding the first sentence in Introduction section ("The main goals of surgical treatment for ulcerative colitis (UC) are to alleviate symptoms and minimize cancer risk") and the relative high cancer risk after IPAA (up to 4% at 20 years) and particularly after IRA (up to 14% after 20 years). ? Two tables should be added summarizing the main complications of both procedures. ? Another table should be added comparing the advantages and disadvantages of the two procedures. ? A number of spelling errors should be corrected.



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9896

Title: Surgical treatment of Ulcerative colitis. Ileorectal vs. Ileal pouch anal anastomosis. Current

evidence.

Reviewer code: 02445675 **Science editor:** Gou, Su-Xin

Date sent for review: 2014-03-03 17:41

Date reviewed: 2014-03-13 19:36

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[Y] Accept
[] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[] High priority for
[Y] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

This paper addresses an important issue such as the surgical treatment of Ulcerative colitis and reviews the outcomes of the main surgical techniques in this clinical setting. The authors review and compare the most recent literature on the Ileorectal and ileal pouch-anal anastomosis (IPAA) describing the 2 different procedures and the therapeutic benefits, side-effects and potential complications due to the surgical approaches. Although the paper is not an original article, I consider it suitable for publication on WJG.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9896

Title: Surgical treatment of Ulcerative colitis. Ileorectal vs. Ileal pouch anal anastomosis. Current

evidence.

Reviewer code: 01799104 **Science editor:** Gou, Su-Xin

Date sent for review: 2014-03-03 17:41

Date reviewed: 2014-03-15 05:58

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[Y] High priority for
[Y] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

The discussion on IRA and IPAA is informative to the gastroenterologists. Would it be better if there is a table with comparison between two procedures on complications and cancer risk? Multiple typing errors are found throughout the text. Most of them are no blank space between two words. In the abstract, the abrreviation of IPAA should be in the first line at its first appearance.