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#### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29138

Title: Laparoscopic and endoscopic co-operative surgery for non-ampullary duodenal

tumors

Reviewer's code: 00045988 Reviewer's country: Japan Science editor: Ze-Mao Gong

Date sent for review: 2016-08-02 19:27

**Date reviewed:** 2016-08-19 02:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[ Y] Grade B: Minor language	[ ] The same title	[Y] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y]No	[ ] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y]No	

### **COMMENTS TO AUTHORS**

To the authors, This paper is an intriguing manuscript showing clinical results and usefulness of LECS procedure for non-ampullary duodenal tumors. The objective of the study is very curious and important. However there are several minor problems. After adequate revisions, this paper can be worth of acceptance in "World Journal of Surgery". 1. In the title page, Probably "running title" should be "key words". If the running title is required by journal's submission rule, it should be added properly. 2. In the abstract, there seems to be several mistakes. Probably, ESD was performed for all of eleven epithelial tumors, so "mainly" may not need in line 10 and the same description in the main text. "Ten superficial epithelial tumor-like lesions" should be "eleven superficial epithelial tumor-like lesions" according to main text and Table 1. The detail of "eleven lesions" should be explained in line 15 and the same description in the main text, for example "eleven epithelial tumor-like lesions during ESD". What is the definition of "severe complication"? By Clavien-Dindo classification or others? Can the minor leakage in this study be severe complication? What is the degree of minor leakage case in Clavien-Dindo classification? The detail about complication should



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be added in Table 1. 3. In the materials and methods, "Neuroendocrine tumors (SMT)" should be just "SMT" in line 8.of the first page. In line 11-13 of the second page, the sentence should be simpler and the word "performed" is duplicated. The detail about hand-sewn suturing after ESD, such as two layers stiches, should be provided in this part, which is now shown in the discussion. The detail about Cine-MRI should be added. 4. in the results, "The ulcer bed was very thin and was easily recognized by the transmitted light of the endoscope" should be "The ulcer bed was very thin and easily recognized by the transmitted light of the endoscope" in line 14-15. "Which resolved" should be "which was resolved" in line 28. The follow-up period should be provided in the result and Table 1 5. In the discussion, The reference should be properly provided. For example, add reference after the first sentence "Recently, the widespread use of endoscopy in regular medical check-ups has increased the detection rates of early-stage duodenal tumors". What is the reason or reference source about the indication of the (original) LECS procedure in line 10-12.



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### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29138

Title: Laparoscopic and endoscopic co-operative surgery for non-ampullary duodenal

tumors

Reviewer's code: 00503623

**Reviewer's country:** United States **Science editor:** Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ Y] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y]No	[Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ Y ] No	

#### **COMMENTS TO AUTHORS**

This manuscript reports on the feasibility and outcome of laparoscopic and endoscopic co-operative surgery (LECS) for duodenal lesion performed on 12 patients diagnose with early non-ampullary duodenal tumors. Although, as pointed out by the authors, the anatomical features of the duodenum make endoscopic resection of tumors very difficult, the use of LESC procedure seems to be a safe and minimally invasive option that warrants further exploration. The manuscript presentation is lucid, the surgical procedures are carefully detailed, and the documentation is quite sufficient. Hence, in my opinion the paper—could be of value to the readership of the Journal. However, you should provide the list of used abbreviations to facilitate the reading.



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#### ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29138

Title: Laparoscopic and endoscopic co-operative surgery for non-ampullary duodenal

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Reviewer's code: 00227386

Reviewer's country: United Kingdom

Science editor: Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y]No	[Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ Y ] No	

#### **COMMENTS TO AUTHORS**

This is an important and unique account of combined endoscopic and laparoscopic resection of duodenal tumours reported from a centre in 12 patients undergoing routine health checks which included endoscopic examination over a period of one year. Few centres would have such an opportunity and this unusual experience is worth recording. There are a few minor comments:- a) Pages 2 and 3. "surgeries....are" should read "surgery....is". b) Page 2. There were 12 patients with 13 lesions. It should be mentioned that one patient had two lesions giving the site and nature of the lesions. c) Page 4. Line 6. "neuroendocrine tumours (SMT)" should read "neuroendocrine tumours (NET). d) Page 6. At the bottom "(Figure 4)" should be added. e) Page 7 The abbreviation (RO) should be given in full. Figures:- a) Figures 2 and 3 are not clear. b) Figure 4 needs arrows pointing to the duodenum.



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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29138

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tumors

Reviewer's code: 00058744 Reviewer's country: Japan Science editor: Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
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		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y]No	

### **COMMENTS TO AUTHORS**

This is a report about laparoscopic and endoscopic co-operative surgery (LECS) for non-ampullary duodenal tumors. The results of this report was good and safe. And not invasive. However, some points should be clarified. 1. What is the indication for the treatment of these duodenal tumors? All duodenal tumors are treated by LECS? Or some duodenal tumors are resected by EMR? Please show the ratio of these treatment. 2. Please use color photo for endoscopic findings.