**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 72636

**Title:** Anorectal dysfunction in patients with mid-low rectal cancer after surgery: a pilot study with three-dimensional high-resolution manometry

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 00057665

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor, Surgeon

**Reviewer’s Country/Territory:** Spain

**Author’s Country/Territory:** China

**Manuscript submission date:** 2021-11-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-04 18:03

**Reviewer performed review:** 2021-11-04 19:02

**Review time:** 1 Hour

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<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ Y] Grade B: Very good</th>
<th>[ ] Grade C: Good</th>
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<tr>
<th>Conclusion</th>
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<td>[ ] Minor revision</td>
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<th>[ Y] Yes</th>
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SPECIFIC COMMENTS TO AUTHORS

This manuscript reports a preliminary study of the impact of rectal cancer treatment on anal function using 3D US. I have the following comments and questions: 1. What method was used to define the distance between the tumor and the anal verge? Was the same one used in every patient? 2. Were sexual practices investigated? Was anal sex practiced by patients? 3. Why were Fisher exact and Mann-Whitney tests used? It should be explained. 4. Why didn't the authors carry out a multivariable analysis? 5. Discussion is too long. It should be shortened.
Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 72636

Title: Anorectal dysfunction in patients with mid-low rectal cancer after surgery: a pilot study with three-dimensional high-resolution manometry

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03468910

Position: Editorial Board

Academic degree: PhD

Professional title: Assistant Professor, Surgeon

Reviewer’s Country/Territory: Italy

Author’s Country/Territory: China

Manuscript submission date: 2021-11-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-18 17:46

Reviewer performed review: 2021-11-22 09:49

Review time: 3 Days and 16 Hours

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SPECIFIC COMMENTS TO AUTHORS

The pathophysiological mechanism of LOW ANTERIOR RESECTION SYNDROME (LARS), after surgery for mild-low rectal cancer has not been fully investigated. The Authors evaluated a population of patients undergoing questionnaire to get rectal cancer and surgery-related information and about defecation symptoms, three and six months after surgery. The Authors also evaluated patients by Three-dimensional high-resolution anorectal monometry (3D HR-ARM). The LARS decreased over time after surgery. The Authors concluded that anorectal dysfunction, focal pressure defects of anal canal and spastic peristaltic contractions from new rectum to anus post-operatively might be the major pathophysiological mechanism of LARS. The manuscript is good. The limits of this manuscript are the small sample size and the short follow-up. I believe that this manuscript is to be published on World journal of Clinical Cases.
Name of journal: World Journal of Clinical Cases

Manuscript NO: 72636

Title: Anorectal dysfunction in patients with mid-low rectal cancer after surgery: a pilot study with three-dimensional high-resolution manometry

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Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor, Surgeon

Reviewer’s Country/Territory: Spain

Author’s Country/Territory: China

Manuscript submission date: 2021-11-04

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2022-01-11 16:28

Reviewer performed review: 2022-01-11 16:31

Review time: 1 Hour

Scientific quality

[ ] Grade A: Excellent [ Y ] Grade B: Very good [ ] Grade C: Good
[ ] Grade D: Fair [ ] Grade E: Do not publish

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) [ Y ] Accept (General priority)
[ ] Minor revision [ ] Major revision [ ] Rejection

Peer-reviewer

Peer-Review: [ Y ] Anonymous [ ] Onymous
SPECIFIC COMMENTS TO AUTHORS

Thank you for addressing the questions appropriately.