

World Journal of Clinical Cases
Editorial Office
Baishideng Publishing Group Inc.

29th November 2024

Re: World Journal of Clinical Cases – **Manuscript No. 99229**

Title: Intraluminal migration of a surgical drain near an anastomosis site after total gastrectomy: a case report

Dear Reviewers,

Thank you for your email dated 28th November 2024. Based on the review, the manuscript remains unchanged as no corrections were deemed necessary.

We would like to confirm the submission of our manuscript to the Journal. Below is our reply to the comment of reviewer.

Thank you and best regards,

On behalf of all authors,
Jurij Janež, MD, PhD, Department of Abdominal Surgery, University Medical Centre
Ljubljana

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors:

The authors presented an interesting manuscript “Intraluminal migration of a surgical drain near an anastomosis site after total gastrectomy: a case report”. The title and key words reflects the contents of the manuscript. The abstract summarizes the contents of the manuscript. The manuscript is formatted in accordance with the requirements of the clinical cases format. The authors presented a clinical case of a 64-year-old patient with a history of arterial hypertension who underwent open total gastrectomy for the treatment of gastric adenocarcinoma. Gastric cancer is a very common type of cancer and a very common cause of cancer death worldwide. The main type of treatment for gastric cancer is surgical treatment – gastrectomy. The use of the gastrectomy method is accompanied by a decrease in the quality of life in the postoperative period. The occurrence of postoperative complications in cases of gastrectomy significantly worsens the patient’s condition. The authors presented a clinical case of postoperative complication of intraluminal migration of surgical drainage near the anastomosis site after total gastrectomy. Surgical re-exploration was deemed necessary. The authors used a sequential algorithm for examining the patient for visualization esophagojejunal anastomotic leakage. CT scan should be the initial diagnostic step, followed by a contrast swallow or endoscopy. A precise characterization is given to each imaging method based on sensitivity and specificity indicators. The manuscript also presents the entire range of conservative treatment methods: drainage and nutritional support for the patient. The practical experience that the authors implemented for an oncological patient is described in detail in the manuscript. On postoperative day 67 the patient was discharged in satisfactory condition . The clinical case of a patient treated for gastric adenocarcinoma will be very useful for study by oncologists and can be used as practical recommendations in the treatment of patients with gastric cancer. The manuscript is adequately illustrated and meets all the requirements of evidence-based medicine. The manuscript is recommended for publication in World Journal of Clinical Cases.

Reply: We thank the reviewer for their valuable review and comments. Based on the review, the manuscript remains unchanged as no corrections were deemed necessary.