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SDI FINAL EVALUATION FORM 1.1

PART 1:

Type of Article:	Case Study	
New Title:	Diffuse Peritonitis Associated Intra Abdominal Barium Leak: An Abdominal Emergency Catastrophe Case	
Title of the Manuscript:	Diffuse Peritonitis Associated Intra Abdominal Barium Leak (An Abdominal Emergency Catastrophe Case)	
Manuscript Number:	Ms_AJCRS_46344	
Journal Name:	Asian Journal of Case Reports in Surgery	

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
In the revised version of the manuscript, the authors responded to some degree to the points made by the reviewer. However, this response was neither point to point nor complete and the manuscript continues to present severe flaws. More specifically:	
1) "An Abdominal Emergency Catastrophe Case" should be removed from the title as the outcome in this patient was not fatal despite this serious complication. The title of the manuscript should be more accurate. For example: Diffuse barium-associated peritonitis after barium enema examination or Diffuse barium-associated peritonitis as a complication of barium enema examination.	
2) The report of the case both in the Abstract and within the manuscript could be: The postoperative period was uneventful and the patient was discharged from hospital on the7th postoperative day. He is in good general health without any ileostomy-related problems at 30 days after surgery. (closure of ileostomy is pending ?)	
3) In Case report, the authors state " after leakage was found during barium enema procedure (Figure 1)." However the legend of Fig 1 states " no visible mass or contrast extravasation" so why do you provide this figure and refer to it as evidence of barium-associated peritonitis, and how was barium leakage detected? Obviously by an abdominal x-ray which should be provided.	
4) "Routine hematological were normal" and "On biochemical examination" in Case report should be Routine haematology and biochemistry tests were normal except for	
5) See also the sentences "is in stable condition and is allowed to move to the ward and well tolerated oral intake. On 7 th post operative day, the patients could discharged" (Case Report)	
6) Figure 1. Previous colon in-loop examination results in the patient showed contrast in the rectum to caecum, no visible mass or contrast extravasation. What do you mean "previous" and "in-loop"? If this figure shows no findings of barium leakage after barium enema what is the point to present it?	
7) Legend of Figure 3. Intra-operative photograph showing the site of rectal perforation.	
8) The authors continue to use the misleading term "extravasation" at several points (see	

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Discussion section)

9) The sentence "Disturbance of bowel wall tensile strength." in the Discussion is irrelevant.

10) The conclusions both in the Abstract and at the end of the manuscript should go like this: "Rectal perforation during barium enema examination with subsequent barium leakage into the peritoneal cavity, is a serious complication and an emergency condition. Barium-associated peritonitis associates with morbidity and with potential mortality. Early recognition and proper management are crucial for successful treatment." This will reflect exactly this case report, its presentation, management and outcome.

11) References 5 and 11 are the same.

12) Please remove hyperlinks from some references.

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