



SDI Review Form 1.6

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_48971
Title of the Manuscript:	Short term outcome of extracorporeal and Intracorporeal anastomosis in laparoscopic colorectal surgeries – A prospective observational study
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<ul style="list-style-type: none"> Line 7: ABSTACT The background paragraph is far too long. It may be completely omitted. The AIM of the study should be commented instead. Line 417: There should be a paragraph with the author's conclusions. 	
Minor REVISION comments	<ul style="list-style-type: none"> Line 42: the authors may consider including the keywords 'intracorporeal' and 'extracorporeal' instead of "rectum" or "techniques", since these terms are somehow unspecific. Line 236: All images are clear and their corresponding captions are clear. The authors may consider include a schematic representation of their modifications in trocar placement rather than a patient photo (Fig.6). 	
Optional/General comments	<p>This is a prospective observational, comparing intra- and extra-corporeal anastomoses in 32 patients with colonic cancer and proximal rectal cancer. Cases converted from lap to open were excluded from the study.</p> <ul style="list-style-type: none"> Line 263: All tables are clearly documented and labelled and explained sufficiently. Statistical analysis is also sufficient. Line 305: The discussion paragraph is fluent. There is direct comparison of the author's results with international literature. Although, most of the included references refer to Right hemicolectomy alone (ref: 28,29,31,35,36,37), rather than other colorectal procedures. The authors included all types of colectomy, yet their numbers are in accordance with literature. A number of prospective studies, both multicenter and single center, have evaluated patient outcomes after colorectal surgery. A review of nine prospective trials with a colorectal anastomosis found no significant difference in overall dehiscence and leaks for a stapled anastomosis compared with a hand-sewn anastomosis (Cochrane Database Syst Rev 2008; :CD003144). Other randomized trials comparing laparoscopic with open colorectal resection for cancer have also failed to show any difference in the rate of complications (N Engl J Med 2004; 	



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	<p>350:2050, Lancet 2005; 365:1718).</p> <p>Although this manuscript does not contribute significantly to literature, overall, the authors have done great work and provide in detail patient selection, preparation, surgical procedure and results and a cohesive discussion. I expect it will be a useful publication, as there are still ongoing randomized trials comparing laparoscopic vs. robotic intracorporeal anastomoses.</p>	
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PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

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