

Review Form 1.7

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| Journal Name: | Journal of Advances in Medicine and Medical Research |
| Manuscript Number: | Ms_JAMMR_110778 |
| Title of the Manuscript: | Two Stage Buccal Mucosal Graft (Bracka's Technique) for Failed Hypospadias Repair |
| Type of the Article | Original Research Article |

PART 1: Review Comments

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| | 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) |
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| <p>Compulsory REVISION comments</p> <p>1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript)</p> <p>2. Is the title of the article suitable? (If not please suggest an alternative title)</p> <p>3. Is the abstract of the article comprehensive?</p> <p>4. Are subsections and structure of the manuscript appropriate?</p> <p>5. Do you think the manuscript is scientifically correct?</p> <p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p> | <p>1. The manuscript is important for scientific community, as patients with sequelae of failed hypospadias repair are very difficult to treat. Publishing the outcomes of salvage surgery for hypospadias is needed to improve the general knowledge on this topic.</p> <p>2. I don't think that wording is entirely accurate here. Maybe not «...for failed hypospadias repair», but «...for complications of failed hypospadias repair»?</p> <p>3. No. Please find the details in the end of this review.</p> <p>4. Yes.</p> <p>5. Yes.</p> <p>6. Yes.</p> | <p>Done</p> |
| <p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p> | <p>1. No. The quality of English in this manuscript is rather poor and should be improved prior to publication.</p> | <p>Done</p> |
| <p>Optional/General comments</p> | <p>Abstract</p> <p>I don't think that adjective «recurrent» is applicable to hypospadias. There can be complications of hypospadias repair, but the congenital malformation can't recur per se.</p> <p>I also don't think that there can be «failed penile hypospadias». How can hypospadias fail? Hypospadias repair may fail, not hypospadias itself.</p> <p>Methods are described insufficiently.</p> <p>«...were no statistically significant variation among the study groups.» - which groups?</p> <p>The information presented as «conclusions» is already well-known. But it is unclear from the abstract how exactly authors came to these conclusions by themselves.</p> <p>Introduction</p> <p>«The primary objective of the repair procedure is to rectify any curvature in the penis, thereby enabling straightness and facilitating successful intercourse.» – no, it's not a primary objective, especially in pediatric practice. Important, but not primary and not always necessary.</p> <p>«In 1941, Humby was the first to propose the surgical application of buccal mucosa for urethral reconstruction [5].» – no, Humby wasn't the first (DOI: 10.1016/j.eururo.2012.06.035).</p> <p>«The neourethral reconstruction is more suited for the thick epithelial layer due to its numerous elastic fibres, reduced propensity to shrink, and excellent imbibition qualities.» – I can't understand this sentence at all.</p> <p>Patients and methods</p> <p>What was the point of application for statistical analysis? Which parameters were compared and between whom?</p> <p>Was the normality of distribution assessed? Probably some variables had to be presented as median values and interquartile ranges?</p> <p>Results</p> <p>Table 1 should be corrected, there are several rows named «Number of previous repairs».</p> <p>In Table 2 it should be clarified which units of time are used to describe an interval between two procedures and duration of follow-up. Also, what does the row named «Percentile» mean?</p> | <p>Done</p> |

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| | <p>« Age, number of previous operations, type of previous urethroplasty, associated chordee, the length of urethral defect were no statistically substantial variation among the study groups.» – what study groups? No groups were mentioned anywhere in «Patients and methods» section! What method was used for statistical analysis in Table 3? If I understand correctly, Table 3 compares baseline data from patients who had good outcome of Bracka’s procedure and from patients who hadn’t. Then why don’t you compare type of previous urethroplasty and associated chordee? Why success rates of Bracka’s urethroplasty are not presented in the article?</p> <p>Discussion The first paragraph copies the «Introduction» section straight away. «Our investigation found no instances of problems at the donor site following the harvesting of oral mucosa grafts.» – there is no such data in «Results» section. «Our results showed that 15 (27.3%) patients included in this study experienced unsuccessful repair with recurring hypospadias caused by total wound rupture or glans dehiscence, requiring further redo surgeries.» – judging by Table 3, there were 26 «failures». This should be checked for probable inconsistency. «We also analyzed the relation between the complications rate and the final meatus location after penile degloving and release of chordee (if present) , the meatal location was proximal, mid-penile and distal in 29 (51.7%), 21 (40%), 5 (8.3%) cases respectively. The highest success rate (60%) was achieved among individuals with distal penile meatus while those with proximal meatus had success rate (55.2%). The lowest success rate was recorded among individuals with external urethral meatus at mid penile shaft (47.6%) with no statistically significant difference between the three study groups.» – this should be placed in the «Results» section, not «Discussion».</p> <p>Conclusions It is hard to argue with such conclusions, as the advantages of staged urethroplasty are well-known. However, these conclusions are only very tangentially related to the outcomes of this study.</p> | |
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PART 2:

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| | Reviewer’s comment | Author’s comment <i>(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)</i> |
| Are there ethical issues in this manuscript? | <i>(If yes, Kindly please write down the ethical issues here in details)</i> | Done |