

Review Form 3

Journal Name:	Asian Journal of Case Reports in Surgery
Manuscript Number:	Ms_AJCRS_125944
Title of the Manuscript:	“A Case report on Key to Gastric Outlet Obstruction”
Type of the Article	Case report

General guidelines for the 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 guidelines for the Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

Compulsory REVISION comments	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.	<p>It is an article with purely anecdotal scientific evidence, leaving ample room for doubt due to several inconsistencies. First, critical clinical data, such as the patient's family and personal history, toxic habits, vital signs, and abdominal physical exam findings, are missing, even though they should have been included. The abstract states that the patient was 21 years old, but the case presentation later claims he was 25, indicating a significant inconsistency. Additionally, the description of "a large abdominal distention demonstrated by Contrast-enhanced CT scanning of the abdomen and pelvis" (without providing images in the publication) contrasts sharply with a supposedly "unremarkable" physical exam. How could the stomach distend so much in two days without causing abdominal distention unless a chronic underlying condition existed?</p> <p>Furthermore, the small size of the key shown in the image raises doubts about the actual cause of the pyloric obstruction. It is doubtful that such a small foreign object could cause an acute inflammatory process leading to obstruction and stomach distention within two days. More probable chronic causes, such as peptic ulcer disease, gastric cancer, and intestinal tuberculosis, should have been ruled out with a biopsy. Also, the stomach did not seem distended in the gastrojejunostomy images provided</p> <p>In terms of therapeutic management, it is noteworthy that the patient was under clinical and radiological observation for more than two days before undergoing endoscopy. Given that the endoscopy reported a "partial pyloric obstruction by a retained foreign body," one might wonder why a gastrostomy was not performed after the surgical removal of the foreign body, followed by medical treatment for acute gastritis, rather than opting for a gastrointestinal bypass with truncal vagotomy as a first-line treatment.</p>	All corrections are made as per the comment
Is the title of the article suitable? (If not please suggest an alternative title)	The title is neither grammatically nor scientifically appropriate. An alternative could be "Gastric Obstruction Associated with Foreign Body Ingestion in an Adult: A Case Report."	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	The abstract's conclusions mention "Asymptomatic presentation of gastric outlet obstruction," despite the patient's multiple episodes of vomiting undigested food. The abstract's presentation of the case is larger than the one in the article.	Noted
Are subsections and structure of the manuscript appropriate?	Yes, but the headers should be in a uniform format.	
Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.	<p>The authors are advised to provide a more detailed chronological sequence of the diagnostic and therapeutic actions taken from the patient's admission. This will give a clear understanding of the case progression. Additionally, it is recommended to include images from the enhanced CT scan of the abdomen and pelvis, and to explain why a biopsy of the pylorus was not considered and why a more conservative approach to surgical treatment was not chosen (considering the case is presented as acute pyloric obstruction due to a foreign body).</p> <p>Since the case discussion concerns an uncommon condition, it should include more information and updated references. Finally, the authors should improve the article's writing, grammar, and formatting (using a single font type).</p>	Done as suggested
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form. :	<p>The references should be numbered in the text from the first to the last (not randomly) and consistently formatted (either alongside the citation or at the end of the paragraph).</p> <p>Recommended further references:</p> <ul style="list-style-type: none">• Favela JG, Argo MB, McAllister J, Waldrop CL, Huerta S. Gastric Outlet Obstruction from Stomach-Containing Groin Hernias: Case Report and a Systematic Review. Journal of Clinical Medicine. 2023 Dec 27;13(1):155.• Tringali A, Giannetti A, Adler DG. Endoscopic management of gastric outlet obstruction disease. Annals of gastroenterology. 2019 Jul;32(4):330.• Jeong SJ, Lee J. Management of gastric outlet obstruction: Focusing on endoscopic approach. World journal of gastrointestinal pharmacology and therapeutics. 2020 Jun 6;11(2):8.• Ziogas D, Vasilakis T, Kapizioni C, Koukouloti E, Tziatzios G, Gkolfakis P, Facciorusso A, Papanikolaou IS. Revealing Insights: A Comprehensive Overview of Gastric Outlet Obstruction Management, with Special Emphasis on EUS-Guided Gastroenterostomy. Medical Sciences. 2024 Feb 1;12(1):9.• Lončar Z, Vasin D, Ristić M, Popović D, Tiosavljević D, Dugalić S, Doklešić K. Multidisciplinary treatment of massive trichobezoar caused an acute gastric outlet obstruction. Srpski arhiv za celokupno lekarstvo. 2023;151(1-2):89-93.• Samad A, Khanzada TW, Shoukat I. Gastric outlet obstruction: change in etiology. Pak J Surg. 2007 Jan;23(1):29-32.	Noted

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Minor REVISION comments		
Is the language/English quality of the article suitable for scholarly communications?	As mentioned, the authors should improve the article's writing, grammar, and formatting (using a single font type).	
Optional/General comments		

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?	(If yes, Kindly please write down the ethical issues here in details)	