Reviewer's report

Title: Implantation of a colorectal stent as a therapeutic approach in the treatment of esophageal leakage - a case report

Version: 1 Date: 19 January 2007

Reviewer: Johannes Zacherl

Reviewer's report:

General
Interesting case report, helpful in special situation

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Abstract background: Anastomotic leaks are usually not followed by a mortality of 60%, especially when located cervically;
Abstract case presentation: what means "...the patient aspirates fluid because the stent was too small..." Ther are some contradictory remarks regarding the position of the anastomosis: the tumor was located beginning at 23 cm ab oral? (from the incisors?), that whoould mean that the esophagus should be resected up to the neck (cervical anastomosis), on the other hand the leak drained into the "left" mediastinum and the anastomois has been resected transthoracally (thus, was intrathoracally located??); please give a clear description about the localisation of the first and second (after reoperation and resection) anastomosis please give a clear description of the time course of interventions, reoperation, stent implantations, starting of oral food intake and discharge
I cannot agree that fibrin glue application is the standard treatment of anastomostic leaks

Discretionary Revisions (which the author can choose to ignore)
use "esophageal remnant" instead of "rest"
the diameters of the larg polyflex stent are 21mm (body, not 22mm!) and 25mm (flare)

What next?: Accept after minor essential revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
'I declare that I have no competing interests'