Reviewer's report

Title: Oxaliplatin-based versus irinotecan-based hyperthermic intraperitoneal chemotherapy (HIPEC) in patients with colorectal peritoneal metastasis: a retrospective analysis

Version: 2  Date: 21 July 2014

Reviewer: Sherif Abdel-Misih

Reviewer's report:

The authors examine an important ongoing question for HIPEC in peritoneal malignancies specifically looking at different HIPEC regimens and approaches. The style and quality of the written manuscript is very well done. There are some major and minor revisions or issues to consider and/or address.

Major compulsory revisions:

The authors allude to in the abstract and areas of the manuscript that this is an analysis looking at colorectal peritoneal metastases. However, this is not entirely accurate in that the 11/32 patients have appendiceal histology (9 in the oxaliplatin group and 2 in the irinotecan group). Granted, sample sizes are often a challenge in most HIPEC studies, I feel that 1/3 of the patients having appendiceal histology is significant given the often more favorable outcomes for appendiceal patients. That being said, though not statistically significant between groups (oxali/iri) with p= 0.139, the 9 patients in the oxaliplatin could certainly play a role in the improved survival trend seen given that figure 2 demonstrates improved survival in the appendiceal patients versus the colorectal. This is a major issue not well discussed and warrants it or exclusion of the appendiceal patients.

Minor essential revisions:

In the abstract, the background does mention the lack of standardization of HIPEC regimens, but does not make mention of the bi-directional approach examined in this study.

It is important for the authors to clearly define what is meant by ‘bi-directional’ so that it is understandable to the readers.

To clarify the methods, is it common practice in your institution that due to the retrospective nature of this study, an IRB approval is not required as opposed to a prospective study because this would be unusual in the United States?

While interesting to understand the perioperative patient management strategies used in your practice, this does not add quality content to the manuscript.

Level of interest: An article of importance in its field
Quality of written English: Acceptable

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.