Reviewer's report

Title: Perforated peptic duodenal ulcer in a paraesophageal hernia - a case report of a rare surgical emergency

Version: 1 Date: 7 October 2005

Reviewer: David I Watson

Reviewer's report:

General

This paper describes a rare and interesting case of perforated DU in a large hiatus hernia.

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

The concluding sentence of the abstract is somewhat misleading – this problem (as admitted in the discussion) had been described before. The authors only claim to a “first” is that their patients survived. The conclusion should be reworded accordingly.

The case presentation is too long, and it contains a lot of information which is not relevant to the message of the paper. It should be shortened by 50%.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

The authors decision to open into the right pleural cavity does not make sense. Satisfactory mediastinal drainage can be achieved by placing drains via the reconstructed oesophageal hiatus. Once the pleura is opened, the pleural cavity is contaminated and any GIT leakage will tend to collect in this cavity. Hence, it doesn’t make good sense to open the right pleura, solely for the purpose of mediastinal drainage when the abdominal route will achieve this. The alternative should be acknowledged and discussed.

Discretionary Revisions (which the author can choose to ignore)

Figure 3 is unclear. It does not add to the case report, and could easily be deleted.

What next?: Accept after minor essential revisions

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: No

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