Reviewer's report

Title: Single-Incision Thoracoscopic Surgery for Primary Spontaneous Pneumothorax

Version: 1 Date: 21 February 2011

Reviewer: Kozo Nakanishi

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The authors describe effectiveness of a technique to perform thorascopic stapled bullectomy by use of roticulated instruments through three access ports in a single incision located the thoracic wall. The following are some points for the author to consider:

1. What is the difference between this SITS technique and uniportal VATS? There are many reports about thoracoscopic surgery known as “uniportal” or “one puncture” technique. We often insert two or three instruments through a two- or three-centimeter incision in ordinary VATS.

2. Is the volume of SITS group statistically small to determine the effectiveness of the new surgical method? The number of SITS is ten and three-port VATS is twenty. Why is the number of SITS cases so small compared to those of three-port VATS? The indications and selection criteria for SITS should be described.

3. Why were more left-sided pneumothoraces than right-sided treated in the author’s institute?

4. How long are all patients followed? This study was made during 4 months in 2009. It has nearly passed two years. It also needs to show at least mean follow-up period and surgical results, such as the recurrence rate, after SITS and three-port VATS.

5. If this is the first report of SITS technology, the approval of the institutional ethics and description of patients consents should be described.

6. Which group did two patients who had air leaks belong to?

7. “…With the ling deflated, …” in line 14 of page 5 may be “…With the lung deflated, ….”

Level of interest: Reject as not of sufficient priority to merit publishing in this journal

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.
Declaration of competing interests:
I declare that I have no competing interests.