Reviewer’s report

Title: Jejunal torsion to right ureter presenting with postoperative adhesion ileus: a case report

Version: 1 Date: 2 March 2014

Reviewer: Brian Shuch

Which of the following following best describes what type of case report this is?: Other

If other, please specify:

Unreported or unusual side effects or adverse interactions involving SURGERY

Has the case been reported coherently?: No

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: Yes

Will the case report make a difference to clinical practice?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

Underreported complication of ureteral mobilization. Language needs work. Should discuss urologic literature a bit as this is discussed and why many surgeons retroperitonealize the ureters after mobilization. Will be suitable for publication likely after these issues are addressed.

Title:
“Torsion to Right ureter”
• may be better way of saying this in proper english. "caused by" or "around"? I am not familiar with the lingo about specifying what is causing the torsion, but saying "to" doesn't sound correct
• Adhesion ileus? referring to bowel obstruction?

Abstract:
• Same issues as above with “to” and adhesion ileus

Abstract Case presentation:
• Any information about the abdominal hysterectomy, complications? Pelvic node dissection performed with extensive ureteral mobilization? Positive nodes?
• Same language issue “turned around to right- should fix

Introduction:
• “dissected and preserved” do you mean the ureters should be "identified" and preserved?
• “dissecting” the ureters isn’t the best way to preserve them…..since the actual definition is “methodically cut up (a body, part, or plant) in order to study its internal parts.”

Case Presentation:
• must fix language here- “Moreover, the CT scan showed and a group of small bowel loops with thickened wall and poorly enhanced (Figure 1.)
• I suggest “group of poorly enhancing, thickened bowel”
• Figure 1 should be the contrast enhanced images showing what you describe. This looks like a non-contrast image only

Operative findings:
• turned around, again are you saying that the bowel snuck behind the Right ureter and became obstructed? Need to better describe was “turned around is”

Post-operative period:
• What is a “control” CT?
• The fluid was aspirating in “THE” interventional radiology

Discussion:
• This complication has been described in the urologic literature with cystectomy and pelvic lymph node dissection. That is why urologic literature says to consider retroperitonealizing the ureters or the but end of the ileal-ureteroanastamosis. Would mention this in the discussion. May be new the gynecologists- but should discuss. Many surgical references/text books can be cited including Campbell’s urology.
• You mentioned “As a result of pelvic lymphadenectomy in radical hysterectomy, ureters uncovered with fatty tissue and allow to bowel torsion around itself.” This really is not a result of the pelvic lymphadenectomy, it's probably a result of the extensive ureteral mobilization without retroperitonealizing the ureters.
Would discuss this reference: Roth, B., Birkhäuser, F. D., Zehnder, P., Burkhard, F. C., Thalmann, G. N., & Studer, U. E. (2011). Readaptation of the peritoneum following extended pelvic lymphadenectomy and cystectomy has a significant beneficial impact on early postoperative recovery and complications: results of a prospective randomized trial. Eur Urol, 59(2), 204–210. In this randomized trial there are 2 uretero-ileal intestinal obstructions from not retroperitonealizing the ureter vs 0 in the group with it performed.

Would definitely say “to consider” closing the peritoneum in cases with extensive ureter mobilization to prevent such a complication

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

Declaration of competing interests:

no competing interests