Reviewer’s report

Title: Case report: Perforation of the neovagina in a male to female transsexual

Version: 3 Date: 12 October 2014

Reviewer: Gennaro Selvaggi

Which of the following best describes what type of case report this is?: An unexpected event in the course of observing or treating a patient

Has the case been reported coherently?: Yes

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?: Yes

Is the anonymity of the patient protected?: Yes

Comments to authors:

We read with interest the article entitled: “Case report: perforation of the neovagina in a male to female transsexual”.

This is a case report of a male-to-female transsexual patient who previously underwent vaginoplasty with sigmoidcolon, and presented few years after with an intrabdominal abscess in association with a perforation of the neovagina.

General consideration: Authors are right in saying this is a rare complication, and this make the article of interest for the public. The take home message of this case report is: making the public aware of a rare complication.

Revisions

1) Remove the terms case report from the title: the Journal is already a case
report journal.

2) English should be revised by a native English speaker.

3) Abstract: say here that the patients underwent primary surgery years before

4) Introduction: Vaginoplasty with colon is not a common procedure; but it is becoming more common. Authors needs to rephrase and can introduce the following references:

WROBLEVSKI P, GUSTAFSSON J, SELVAGGI G:
“Sex Reassignment Surgery for Transsexuals”.
Curr Opin Endocrinol Diabetes Obes 2013 Dec, 20(6): 570-574

SELVAGGI G, BELLRINGER J:
“Gender Reassignment Surgery: an overview”

“Gender Identity Disorder: General Overview and Surgical Treatment for Vaginoplasty in Male-to-Female Transsexuals”

5) The last sentence of the introduction section “this case emphasize…” should be moved to the conclusion section.

6) In the case presentation section, move the “transsexual surgery history” at the beginning of the section.

7) “she had vaginal intercourse and…prior to the onset”: when exactly? This could become the key point of the entire manuscript. Investigate more: what was used? How often? How was the stent inserted? Which direction? Where was the perforation located in relation to the stent?

8) How long after the patient came to the emergency was the surgery performed?

9) When antibiotics were initiated?

10) The surgeon should have drained the intrabdominal abscess completely. Avoid saying “residual intrabdominal abscess”. If there was a residual abscess, please explain why.

11) Why was the antibiotic therapy continued for 8 weeks? Oral?

12) Discussion: change the word “female transgenderism” with “gender dysphoria in biological males”.

13) There is no evidence that sigmoid vaginoplasty is the best choice. For the past 15 years, the primary choice has been inverted penile flap technique (see
references as above), nevertheless, bowel vaginoplasty is nowadays becoming more common than before. Still, there is no evidence saying that bowel vaginoplasty is better than other techniques.

14) In the discussion section, explain why you suggest that vaginal perforation came first, and this caused the abscess. Are you sure about that? Or should be better to say: intrabdominal abscess is association with neo-vagina perforation?

15) I kind of agree that vaginal dilation could have caused the perforation. Highlight this part throughout the manuscript.

16) Introduce a separate “Conclusion” section. Move the last paragraph of the discussion to the conclusion section. In the conclusion section, give less emphasis to the “taking medical history”. It would be a mistake to miss history of previous surgery. Revise the manuscript thinking about the take home message. Take home message is not: “taking medical history”. Take home message of this manuscript should be: “informing physicians and patients that bowel vaginoplasty could give the patient a weak vagina.

**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

**Declaration of competing interests:**

I declare that I have no competing interests