Reviewer's report

Title: Protection of postoperative genital function by total mesorectal excision combined with pelvic autonomic nerve preservation not at the therapeutic effects and for rectal cancer of male patients

Version: 3
Date: 23 June 2015

Reviewer: Ibrahim FAKHR

Reviewer's report:

The author is studying an area of great concern in the CRC surgery. The number of patients is impressive; however the following points are of concern in this manuscript:

Major Compulsory Revisions:
1. The title is incomprehensible and needs to be rephrased.
2. The English language deserves a deep and meticulous revision covering all aspects: Spelling, grammar, and phrasing.
3. In the introduction the authors refer to statistics without mentioning its geographical origin
4. In the technique, the authors refer to previous explanations not present in the text.
5. The preoperative and postoperative techniques should be mentioned in their order of occurrence in relation to the operation.
6. In erection evaluation, the authors classify (I = no difference compared with pre-operation, as normal erection), later in exclusion criteria, they mentioned those who have preoperative erectile dysfunction. This means that all preoperative should be normal, thereby classification definition should be corrected.
7. In the methodology, patients used TNM staging to classify patients, while in results they used Dukes staging.
8. Table (2), hospital stay is not related to this table.
9. As presented in the methodology, erectile/ejaculation stage, and disease stage should all appear in the result tables, and should be statistically analyzed (analysis of variance).
10. The authors have classified 4 surgical levels of PANP in the methodology, however, they did not mention their relation to the results.
11. Although the authors have a long-term FU for local recurrence, no genital function erectile dysfunction has been tested during this FU. This is of great importance, since many of these functions may improve later with time, or may decrease later if postoperative RT is given.
12. The recommendation has no basis in the results.
Minor Essential Revisions: None
Discretionary Revisions: None

Level of interest: An article of importance in its field

Quality of written English: Not suitable for publication unless extensively edited

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