Reviewer's report

Title: Enhanced Recovery After Surgery Program in Gynaecologic Oncological Surgery in a Minimally Invasive Techniques Expert Center

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Reviewer: Giulio Sozzi

Reviewer's report:

The paper by Lambaudie et al. provides an observational study evaluating the implementation of Enhanced Recovery Program in gynecologic oncological surgery in a minimally invasive techniques expert centre. Enhanced recovery after surgery is one of the most important goals to obtain in the modern medicine. For these reasons, the scientific relevance of the presented study seems adequate.

On the other hand, some criticisms have to be raised:

General points:

In your study, there are 175 patients treated through minimally invasive surgery and only 25 treated by open surgery. While there are some studies about the use of Enhanced Recovery After Surgery Program in open surgery or generally in benign disease, there aren't, to our acknowledgement, any studies about it in minimally invasive surgery for gynaecological malignancies. Considering the small sample of open procedures, I suggest to exclude patients treated through laparotomic approach modifying the title as: "Enhanced Recovery After Surgery Program in Minimally Invasive Procedures for Gynaecological Malignancies". In my opinion, it will confer to the study more originality.

1) I suggest to compare robotic and laparoscopic surgery, to notice if there are any differences between the two kind of minimally invasive surgery.

2) Furthermore, as we know the of use of tobacco or alcohol, the presence of anaemia or undiagnosed diabetes/hyperglycemic states increase perioperative morbidity rates. The interventions addressing of these factors prior to elective surgery reduce perioperative morbidity and mortality. Did you apply, in the first pre-operative phase, a preadmission optimization program to correct these factors? This kind of program has a high-moderate evidence level and is strongly recommended from previous studies (Nelson et al. Gyn-
Therefore, if you applied a preadmission optimization program of patients you must specify it.

3) In Table 1 you wrote in table legend: "BMI: body mass index", but in the table there is nothing about BMI. Please analyze BMI in the two subgroups.

4) Excluding patients treated through open surgery, improve discussion and conclusions in this way.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

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