Reviewer’s report

Title: Surgical management of pyelo-ureteral junction syndrome in a resource-limited setting: Case of Zinder National Hospital, Niger

Version: 4 Date: 06 Aug 2019

Reviewer: Reviewer 2

Reviewer's report:

PEER REVIEWER ASSESSMENTS:

OBJECTIVE - Full research articles: is there a clear objective that addresses one or several testable research questions? (Brief or other article types: is there a clear objective?)
Yes - there is a clear objective

DESIGN - Is the current approach (including controls and analysis protocols) appropriate for the objective?
Yes - the approach is appropriate

EXECUTION - Are the experiments and analyses performed with sufficient technical rigor to allow confidence in the results?
Yes - experiments and analyses were performed appropriately

STATISTICS - Is the use of statistics in the manuscript appropriate?
N/A - there are no statistics in this study

INTERPRETATION - Is the current interpretation/discussion of the results reasonable and not overstated?
Yes - the author's interpretation is reasonable

OVERALL MANUSCRIPT POTENTIAL - Has the author addressed your concerns sufficiently for you to now recommend the work as a technically sound contribution? If not, can further revisions be made to make the work technically sound?
Probably - with minor revisions

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: The authors made significant changes to address the reviewer questions, and the manuscript looks more ready for publication.

REQUESTED REVISIONS:
Few minimal changes can be added:
1- Abstract: - please add the lab reference range for the creatinine. - The conclusion at the end of the abstract is better replaced by the one at the end of the article, or replace "remains the reference technique" to "provides a successful alternative"

2- Methods p 4 line 37-38: patient consent is not needed for retrospective studies, if the authors went to the troubles of getting it.

3- Results p5 line 24-25: nephrectomy was already excluded from the study. Table 1: Patient number 4 in had leak for 25 days and stent was removed at day 4, what do the authors recommend when the leak continues, any imaging or words of wisdom to the readers on how they address this. Table 1: there is a disconnect between the duration of leak (duration of retroperitoneal drain) and reporting this as a complication ie they are all recorded as none except patient number 4, for example patient number 6 had the drain for 14 days and still is counted as none in complications.

- Discussion p 7 line 13 "sutures" instead of "gestures"

ADDITIONAL REQUESTS/SUGGESTIONS:
Please see above.

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.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable
Declaration of competing interests
Please complete a declaration of competing interests, considering the following questions:

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