Reviewer’s report

Title: Transurethral resection of ejaculatory duct combined with seminal vesiculoloscopy for management of persistent or recurrent hemospermia in men with ejaculatory duct obstruction

Version: 1 Date: 02 Oct 2019

Reviewer: Chien-lun Chen

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This study reports a successful treatment outcome of a cohort of 103 patients with persistent or recurrent hematospermia from ejaculatory duct obstruction (EDO) who underwent transurethral resection of ejaculatory duct (TURED) and seminal vesiculoloscopy. The post-op follow-ups reveal improved parameters without severe complications. The comments are as followings.

Major concerns:

1. In the background introduction, the authors indicate that EDO can be subdivided into congenital or acquired EDO. What is the percentage of this classification in this study cohort? How could they be classified clinically? Will there be any difference in treatment consideration? No such information could be found in the subsequent discussion.

Minor comments:

2. The treatment outcome has been overemphasized as making redundancy. It has been highlighted in the abstract and clearly described in the results. In the discussion, it was again reiterated 3 times, Page 8 line 45, As we found…; Page 11 line 3, in our study, all cases…; and Page 12 line 3, this is the first study to show….

3. Some mistyping needs to be corrected. Page 9 Line 54, "relieved". Page 21 Table 1, Follow-up duration, "months".

4. Hematospermia, hemospermia, and haematospermia were used randomly in the manuscript which should be double-checked.

5. Page 7, Result, line 50, whereas semen PH and sperm concentration did not improve significantly. The "improve" should be "change" as the authors did not define the meaning of improvement.

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