Reviewer's report

Title: Single - incision laparoscopic surgery (SILS) in the treatment of an intussusception induced by a solitary hamartomatous polyp: a case report and a literature review.

Version: 1 Date: 21 January 2015

Reviewer: Mavroudis Voultsos

Which of the following best describes what type of case report this is?: None

Has the case been reported coherently?: No

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?: No

Will the case report make a difference to clinical practice?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

Dear Dr. Michael Pitiakoudis,

After carefully going through your submitted manuscript, I have the following observations to make that may aid you towards publishing you work:

1) Even though the level of the manuscript's English is adequate, it may need some revising prior to publication; to name a few revisions: obstructive ileum should be obstruct. ileus in many parts, pedunculated instead of peduncled, insignificant instead of no significant etc.

2) Since you wish to go through with your case publication, I believe it would to the best of your interests to decide the focus of your manuscript. Please take the
time to read on as I will elaborate further on this.

3) When reporting a case of PJS, a more detailed presentation of the clinical status would be desirable. For example, you missed to report the two forms PJS can have (a. familial, with STK11(LKB1) tumor suppressor gene mutation, or b. sporadic, without the afore mentioned gene mutation), the associated cancer risk (in the polyps themselves and more importantly in other organs such as pancreas, lung, breast), bleeding can also be from upper gastrointestinal track (not only rectal as you mention) and incidence is better reported as a range (reported PJS is 1 in 25,000 to 250,000/300,000; varied in published reports).

4) While going through your manuscript, I was not able to locate any data to support that your patient had/has indeed PJS. Based on what you report, she does not seem to fullfil any of the criteria. Moreover, the polyps of PJS have characteristic histologic appearance (frond-like elongated epithelial component, cystic gland dilatation extending into the submucosa or muscularis propr. and barbarising smooth muscle extending into polyp fronds). This is contrast to solitary juvenile polyps, which can be solitary, have a lamina propria lacking smooth muscle and which may be the case in your patient. I would advise you to go through the latest published PJS guidelines (if I am not wrong they are by the same group who published guidelines for FAP and Lynch syndromes).

5) Although it may be something that is ordinarily done in Greece, having an approval and consultation from an adult (you mention your patient to be 19 years old) and his family, is something that would be best omitted in the final version of your manuscript.

6) In the beginning of the manuscript you report that the enterectomy was done by SILS but reading further on it becomes clear that it was SILS assisted (intestine exteriorisation, resection and anastomosis was done extra corporeally). So I believe it would be best to revise this part.

7) In the era of published systematic reviews on SILS hepatectomies/gastrectomies/bariatric surgeries etc, I believe that most surgeons who wish to further dwelve in this area would not depend on a report of SILS assisted enterectomy to further push on. So I would suggest to focus on your target group of readers in a more suitable way (ex. change manuscript title).

It is fantastic to hear that SILS despite its many drawbacks and difficulties is implemented in way that it may allow it to be better and further incorporated in the modern’s surgeon mind. Based on this and the above I would suggest to revise and resubmit your manuscript.

Sincerely Yours,

Dr. Voultos Dakis

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published