



SDI Review Form 1.6

Journal Name:	International Research Journal of Gastroenterology and Hepatology
Manuscript Number:	Ms_IRJGH_56701
Title of the Manuscript:	The superior mesenteric artery syndrome : a rare complication after post-traumatic spine surgery.
Type of the Article	Case Report

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>To authors,</p> <ol style="list-style-type: none"> I edited the abstract. If you like it, please use this one. Also use these expressions in the text. <p>ABSTRACT: Superior mesenteric artery syndrome is a rare complication of post-traumatic spine surgery. The third portion of the <u>duodenum</u> is compressed between the <u>abdominal aorta</u> and the <u>superior mesenteric artery</u>: duodenal (intestinal) occlusion and sometimes arterio-mesenteric occlusion occur. We report the case of a young male patient, in whom this syndrome occurred after spinal surgery. He had fractures in the dorso-lumbar vertebrae. The patient had undergone an osteosynthesis. On post-operative day 3, he had vomiting. Abdominal CT revealed the findings indicative of superior mesenteric artery syndrome: gastric dilatation and complete halt of the third part of the duodenum. We chose conservative treatment: the rest of the digestive tract, early parenteral nutrition, and correction of fluid and electrolyte imbalances. These treatments did not ameliorate the condition and thus we performed laparotomic gastro-jejunal bypass, which completely ameliorated the condition. The patient was discharged on the 7 postoperative day. We here summarize the clinical features and treatment fundamentals of this disorder.</p> <ol style="list-style-type: none"> Do you use French word processor? Please use English one and do spell-check. Also, English should be extensively edited. 	
Minor REVISION comments		
Optional/General comments		



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PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

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