

Review Form 3

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_123766
Title of the Manuscript:	Duration Of Post-Operative Antibiotic Treatment in Acute Complicated Appendicitis: A Systematic Review
Type of the Article	Review

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PART 1: Review Comments

Compulsory REVISION comments	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<p>Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.</p>	<p>This systematic review tackles a significant clinical question: the optimal duration of postoperative antibiotic therapy for patients with acute complicated appendicitis. One of the strengths of this review is its rigorous methodology, following PRISMA guidelines to ensure a comprehensive search across multiple databases. While the review presents robust evidence, it has numerous limitations due to the variable studies design and sample size. The review provides a well-supported argument for the use of shorter antibiotic courses in managing complicated appendicitis, but ongoing research and more large-scale trials should be considered to refine further recommendations.</p>	
<p>Is the title of the article suitable? (If not please suggest an alternative title)</p>	<p>The title is suitable for this article, but "appendicitis" is spelled correctly "appendicitis", so please edit this. However, the author should consider a more engaging title for the readers to choose this article over another. An alternative title could be: "Breaking the Antibiotic Habit: Shorter Treatments for Complicated Appendicitis: A Systematic Review"; "Less is More? Rethinking Post-operative Antibiotics in Complicated Appendicitis: A Systematic Review"; "Shorter, Smarter, Safer: Revisiting Antibiotic Use After Complicated Appendicitis".</p>	
<p>Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.</p>	<p>Yes, please rephrase the following:</p> <p>In background:</p> <ul style="list-style-type: none"> - the phrase "for those types of infections" could be more specific; alternative: "for gangrenous or perforated appendicitis and/or abscess formation." <p>In objectives:</p> <ul style="list-style-type: none"> - "Randomizing controlled scan trials" should be corrected to "randomized controlled trials" (RCTs); - the term "length-of-sickness hospitalization" (LOS) is unclear. It should simply be "length of hospital stay (LOS)."; - the sentence "randomizing controlled scan trials that tested different periods for which a patient received antibiotics after surgery" is slightly awkward. Please rephrase to something like this: "RCTs comparing different durations of postoperative antibiotic therapy." <p>In method:</p> <ul style="list-style-type: none"> - the phrase "observational ones" is informal. Use "cohort and observational studies" instead. <p>For clarity a brief conclusion at the end summarizing the clinical implications of the findings could enhance the abstract. For example: "These findings suggest that shorter antibiotic courses are safe and effective in reducing hospital stays without increasing the risk of complications."</p>	
<p>Are subsections and structure of the manuscript appropriate?</p>	<p>Yes, the subsections and structure of the manuscript are appropriate.</p>	
<p>Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.</p>	<p>The review's findings align with the growing trend in surgical and medical practice to minimize antibiotic use without compromising patient outcomes. The data supports the safety and efficacy of short-term therapy but also highlights its limitations and the importance of a patient-specific quality of care. Although the article presents robust evidence, differences in outcome measures and reporting standards across studies could lead to inconsistencies. The quality of discussion needs improving the discussion is disjointed with an abrupt mention of various studies; the flow should be improved for better understanding when reading the article.</p>	
<p>Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.</p>	<p>Yes, the references are recent, but the article refers to multiple studies by their first author, but the citation style varies; for example: "van Rossem et al." is cited in some sections, while others are referenced by number []; please consider using a consistent citation format.</p>	

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<p><u>Minor</u> REVISION comments</p> <p>Is the language/English quality of the article suitable for scholarly communications?</p>	<p>No, the article should be further corrected for grammar mistakes and some sentences are to be rephrased for better understanding.</p> <p>Some examples:</p> <ul style="list-style-type: none"> - rephrase: prolonged courses are practiced at other institutions. Or, all phrase The optimal duration of antibiotic therapy for those types of infections is debatable; prolonged courses are practiced at other institutions. - the meta-analysis found that short-term antibiotic therapy (≤ 5 days) is “as” effective as longer courses (> 5 days) in the prevention of postoperative infections. - rephrase for better understanding: Some 25–30 % of all cases are considered complex [6,7] and so it may be inappropriate to consider the same set goals for open surgery and others minimally invasive. - rephrase: A mail survey of Dutch surgeons and residents found a for 3 days (58% of surgeons) or 5 days (40%) postoperative orally given antibiotics was used Appendicitis Collaborative Study Group. It is hard for the reader to understand the Dutch survey findings! - grammar and rephrase for better understanding: It is also a key issue to determine the shortest but safe and effective antibiotic regimen in order to decrease both LOS, “and” cost of treatment if it has an impact on reducing mortality or morbidity risk similar at longer courses duration as supposed with ACE trials and resistance [3]. 	
<p><u>Optional/General</u> comments</p>	<p>An overall good review but needs to be corrected before publishing.</p>	

PART 2:

	<p>Reviewer’s comment</p>	<p>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)</p>
<p>Are there ethical issues in this manuscript?</p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

Reviewer Details:

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