Journal of Cellular & Molecular Anesthesia
Volume 9 · Issue 3 · e145475

OPEN PEER REVIEW

Comparison of Baska Mask Versus Endotracheal Tube for General Anesthesia in Laparoscopic Cholecystectomy: A Randomized Controlled Trial

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SUBMITTED	REVISED	ACCEPTED	DOI
28 Jan 2024	27 Apr 2024	1 May 2024	10.5812/jcma-145475

About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

More about open peer review: brieflands.com/knowledgebase/opr

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1 Original submission

4 comments · 11 Feb 2024 – 3 Mar 2024

Referee 1 Reviewer

MAJOR REVISION 11 Feb 2024

The manuscript presents a comparative study of the Baska mask and the endotracheal tube for airway management during laparoscopic cholecystectomy. It is structured as a randomized trial involving 50 patients, focusing on parameters such as heart rate, blood pressure, oxygen levels, and ease of device insertion. The study suggests that the Baska mask may offer advantages over the endotracheal tube in terms of reduced cardiovascular stress and throat irritation.
Strengths:
- The study addresses a relevant clinical question, potentially impacting surgical practice.
- The randomized trial design is a strong methodological approach that enhances the credibility of the findings.
Major Concerns:
- Writing and Presentation: The manuscript has significant issues in writing and presentation. The introduction, in particular, needs to be completely rewritten to clearly articulate the study's purpose and objectives without redundancy or unnecessary references.
- Consistency: There is a discrepancy in the type of study described in the abstract versus the main body of the manuscript. This inconsistency needs to be resolved to ensure clarity and coherence.
- Sample Size: The limited sample size may affect the reproducibility of the findings, and this should be discussed in the manuscript.
Minor Concerns:
- The title should be revised to include "randomized trial" and specify "cholecystectomy" instead of "surgery."
- Ensure uniformity in terminology and data presentation, such as correcting spacing issues in device names.
My recommendation:
I recommend major revisions. The manuscript requires a thorough rewrite to address the major flaws in writing and presentation, particularly in the introduction. Consistency between the abstract and the main body regarding the study type must be ensured. Once these substantial revisions are completed, the manuscript should be resubmitted for further review.

Referee 2 Reviewer

MINOR REVISION 17 Feb 2024

1. Summary:
The manuscript investigates the comparative effectiveness of the Baska mask and the endotracheal tube in managing airways during laparoscopic cholecystectomy. The study involved a randomized trial with 50 patients who were assigned to either device. Key metrics such as heart rate, blood pressure, oxygen levels, and ease of device insertion were evaluated. The findings indicate that while both devices ensured adequate oxygenation, the Baska mask resulted in less cardiovascular stress and throat irritation compared to the endotracheal tube.
2. Strengths:
- The study addresses a relevant clinical issue by comparing two airway management devices, which could potentially influence practice in laparoscopic surgeries.
- The randomized trial design enhances the reliability of the findings.
- The manuscript provides clear and detailed results on hemodynamic parameters and patient comfort, contributing valuable insights to the field.

3. Major Concerns:
- The manuscript does not mention the use of capnography in routine monitoring, which is a critical aspect of airway management during surgery. This omission should be addressed to ensure comprehensive monitoring data.
- The sample size of 50 patients, while informative, may limit the generalizability of the findings. Consider discussing the potential impact of the sample size on the study's conclusions.
4. Minor Concerns:
- It is suggested that "cholecystectomy" be used instead of "surgery" in the title for specificity.
- Consider revising the title to include "randomized trial" to reflect the study design.
- Ensure consistency in the formatting and presentation of data, such as the spacing in "Baska mask" and "Endotracheal tube."
5. Recommendation:
I recommend accepting the manuscript with minor revisions. Addressing the mention of capnography in routine monitoring and making the suggested minor adjustments will enhance the clarity and comprehensiveness of the manuscript.

Associate Editor

MAJOR REVISION 18 Feb 2024

To ensure the manuscript is revised effectively according to the reviewer's comments, here is a structured plan for revision:
1. Introduction:
Rewrite the introduction to clearly state the purpose and objectives of the study without redundancy.
Remove unnecessary references from the statement of the study's aims.
Ensure the introduction logically leads to the research question and highlights the significance of comparing the Baska mask and endotracheal tube.
2. Consistency:
Verify that the type of study described in the abstract matches the description in the main body of the manuscript. Ensure consistency in terminology and study design throughout the document.
3. Methodology:
Address the omission of capnography in routine monitoring. Include details on how capnography was used or justify its absence if applicable.
Discuss the limitations of the sample size and its potential impact on the generalizability of the findings.
4. Results and Discussion:
Ensure that all data are presented clearly and consistently, with appropriate statistical analysis.
Highlight the key findings and discuss their implications in the context of existing literature.
5. Title and Formatting:
Revise the title to include "randomized trial" and specify "cholecystectomy" instead of "surgery."
Correct any formatting issues, such as spacing in device names, and ensure uniformity in presentation.
6. General Writing and Presentation:
Address any major flaws in writing and presentation throughout the manuscript. This includes improving clarity, coherence, and flow.
Consider seeking feedback from colleagues or a professional editor to enhance the manuscript's readability.

Once these revisions are made, prepare a detailed response to the reviewers, outlining how each comment was addressed in the revised manuscript. This will facilitate the re-evaluation process upon resubmission.

Editor-in-Chief

MAJOR REVISION 3 Mar 2024

Please review and address all comments:
- Carefully review each comment provided by the reviewers. Ensure that you understand the concerns and suggestions they have raised.
- Create a checklist of all the comments to systematically address each one in your revisions.
Introduction:
- Rewrite the introduction to clearly state the purpose and objectives without redundancy or unnecessary references.
- Ensure the introduction logically leads to the research question and highlights the significance of the study.
Consistency across the manuscript:
- Ensure that the study type and methodology described in the abstract are consistent with the body of the manuscript.
- Verify that all terminology is used consistently throughout the document.
Methodology:
- Include details on capnography usage in routine monitoring or provide a rationale for its absence.
- Discuss the sample size calculation method and limitations and their potential impact on the study's conclusions.
Results and discussion:
- Present data clearly and consistently, ensuring that statistical analyses are appropriate and well-explained.
- Discuss the implications of the findings in the context of existing literature and address any discrepancies or unexpected results.
Title and formatting:
- Revise the title to accurately reflect the study design (e.g., "randomized trial") and specify "cholecystectomy" instead of "surgery."
- Correct any formatting issues, such as spacing in device names, and ensure uniformity in presentation.
General writing:
- Improve the overall clarity, coherence, and flow of the manuscript. Address any major flaws in writing and presentation.
- Consider professional editing services if necessary to enhance readability.
Prepare a Detailed Response to Reviewers:
- Draft a comprehensive response letter addressing each reviewer’s comment. Clearly outline the changes made in the manuscript and provide justifications for any comments not addressed.

Once all revisions are complete, submit the revised manuscript along with the response letter to the journal for re-evaluation.
By following this plan, you can ensure that the manuscript is thoroughly revised in accordance with the reviewers' expectations, improving its chances for acceptance upon resubmission.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Reviewer 1:

Question: *Reviewer 1:*
add randomized trial to title

better to write, cholecystectomy instead of surgery

capnography was not mentioned in routine monitoring

Reply:

Dear Reviewer,

Thank you for your valuable feedback. We appreciate your insightful suggestions and have made the following revisions to address your comments:

The title has been updated to include "Randomized Trial" for enhanced clarity and emphasis on the study design.

We have replaced the term "surgery" with "cholecystectomy" in the title to provide a more specific and focused description.

The oversight regarding capnography in routine monitoring has been rectified, and Capnography was used at Time of insertion is calculated from the time between picking the instrument to appearance of first wave in Capnography

We believe these modifications contribute significantly to the precision and comprehensiveness of our study. We appreciate your diligence in reviewing our work and are grateful for your constructive input.

Reviewer 2:

Question: 1- It is not necessary to repeat the results in the text, figure and table, it is not correct either.

2- You can summarize many of the presented variables in a table and present the results. For example, a table can be enough to present and compare basic and demographic variables.

3- There is no need to repeat all the results presented in the table again in the text. Present the important numbers and results in the text and refer to the table for details.

4- Report all p values with 3 decimal places.

5- The number of 12 tables is too much for a research paper. Many of these tables can be combined together. The number of tables should not exceed 4-5.

6- The tables alone should be the expression of all the information. The use of group B or E cannot explain the table independently. It is better to use the full names of the groups instead of this abbreviation.

Reply:

Thank you for your thoughtful and constructive feedback. We have carefully considered your comments and made the following revisions to enhance the clarity and conciseness of our manuscript:

Results Repetition: We have revised the text to avoid unnecessary repetition of results in the text, figure, and table. This should streamline the presentation and improve readability.

Table Summarization: We appreciate your suggestion to summarize variables in a table, especially for basic and demographic variables. We have incorporated a summarized table to present and compare these variables, providing a more concise overview.

Avoiding Redundancy: We have revised the text to present only the essential numbers and results, avoiding unnecessary repetition of information already presented in the tables.

P-Values Precision: We have updated all p-values in the manuscript to three decimal places for consistency and precision.

Table Reduction: Acknowledging your concern regarding the number of tables, we have combined relevant tables where possible, resulting in a more streamlined presentation. The total number of tables now adheres to your recommended limit.

Group Abbreviations: We have replaced group abbreviations (e.g., Group B or E) with the full names of the groups in the tables to improve clarity and ensure the tables can stand alone without reference to the text.

Reviewer 3:

Question:

Reply:

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2 Revision 1

3 comments · 29 Mar 2024 – 7 Apr 2024

Referee 1 Reviewer

MAJOR REVISION 29 Mar 2024

Summary: The manuscript evaluates the Baska mask versus the endotracheal tube for airway management during laparoscopic cholecystectomy. It aims to assess the impact of these devices on patient physiology and comfort. The study is a prospective randomized controlled trial involving 50 patients, but it requires major revisions to improve its clarity, coherence, and adherence to scientific standards.
Strengths:
- The study addresses a relevant clinical question by comparing a newer airway management device with a traditional one.
- The use of a randomized controlled trial design is a methodological strength that enhances the reliability of the findings.
Major Concerns:
1. Title and Abstract: The abstract is overly lengthy at 583 words and needs to be condensed. Keywords should be revised to avoid abbreviations and align with MeSH terms.
2. Introduction: The term "cholecystectomy" is incorrectly substituted for "surgery" in several instances, and references are inaccurately cited. The rationale for the study is not well-supported by the cited references, which are outdated.
3. Methods: The methodology section lacks clarity. Abbreviations for groups should be avoided, and the statistical analysis methods need to be clearly described. A flow diagram of the study is missing and should be included.
4. Results: The results section requires restructuring. There is unnecessary repetition of data across text, figures, and tables. The number of tables should be reduced, and p-values should be consistently reported with three decimal places.
5. Discussion: The discussion repeats methods and results instead of focusing on interpreting the findings in the context of existing literature.
Minor Concerns:
- Correct spelling and grammatical errors throughout the manuscript.
- Ensure that references are accurately cited and relevant to the content discussed.
- Improve the overall structure and flow of the manuscript for better readability.
Recommendation:
Major revisions are required. The manuscript needs substantial rewriting to address the issues in the abstract, introduction, methods, results, and discussion sections. The authors should focus on improving clarity, coherence, and adherence to scientific writing standards. Resubmission for review is recommended after these revisions are made. If the necessary corrections are not implemented, the manuscript may not be acceptable for publication.

Associate Editor

MAJOR REVISION 2 Apr 2024

The manuscript investigates the efficacy of the Baska Mask compared to the Endotracheal Tube (ETT) for airway management in patients undergoing laparoscopic cholecystectomy. This randomized controlled trial involved 50 patients, assessing hemodynamic stability, ease of insertion, and postoperative complications. The study found that the Baska Mask resulted in less hemodynamic disturbance, was easier and faster to insert, and led to fewer postoperative sore throats, suggesting that it is a superior alternative to the ETT in this

context.
Strengths
-Novelty: The study addresses an important clinical question by comparing a newer airway device (Baska Mask) with the traditional ETT, potentially offering improved patient outcomes.
-Methodology: The use of a randomized controlled trial design strengthens the validity of the findings. The comparison of primary and secondary outcomes provides a comprehensive evaluation of the devices.
-Clarity: The manuscript is clear in its objectives, methods, and presentation of results, making it accessible to readers.
Major Concerns:
-Statistical Analysis: The manuscript should provide more detailed statistical analysis and discussion on the potential confounding factors that could affect the outcomes.
Minor Concerns:
-Language and Formatting: Ensure consistency in terminology (e.g., "Baska Mask" vs. "Baska mask") and check for any typographical errors.
-References: Include more recent studies or reviews that discuss the use of supraglottic airway devices in similar surgical contexts to strengthen the literature review.
Recommendation:
Major revisions are required. While the study presents promising results, addressing the reviewer's concerns is essential for further processing. Additionally, providing a more detailed statistical analysis will enhance the manuscript's robustness and applicability.

Editor-in-Chief MAJOR REVISION 7 Apr 2024

Summary:
The manuscript investigates the effectiveness and safety of the Baska mask compared to the endotracheal tube for airway management during laparoscopic cholecystectomy. Conducted as a prospective randomized controlled trial with 50 patients, the study aims to assess the impact of these devices on patient physiology and comfort. However, the manuscript requires significant revisions to align with the reviewer's comments and improve its overall quality.
Strengths:
- The study addresses an important clinical question by evaluating a newer airway management device against a traditional method.
- The randomized controlled trial design is a robust methodological approach that enhances the validity of the findings.
Major Concerns:
1. Title and Abstract: The abstract is excessively long and should be summarized to focus on key points. Keywords need revision to avoid abbreviations and should align with MeSH terms.
2. Introduction: The introduction contains inaccuracies, such as the incorrect substitution of "cholecystectomy" for "surgery," and references are not accurately cited. The necessity of the study is not well-supported by the cited references, which are outdated.
3. Methods: The methodology section lacks clarity. Avoid abbreviations for group names, and clearly describe the statistical analysis methods. Include a flow diagram of the study.
4. Results: The results section needs restructuring to eliminate repetition across text, figures, and tables. Reduce the number of tables and consistently report p-values with three decimal places.
5. Discussion: The discussion should focus on interpreting the findings in the context of existing literature, rather than repeating methods and results.
Minor Concerns:

- Address spelling and grammatical errors throughout the manuscript.
- Ensure references are accurately cited and relevant to the discussion.
- Improve the overall structure and flow for better readability.

Recommendation:

Major revisions are required. The manuscript needs substantial rewriting to address the reviewer's comments. The authors should focus on improving clarity, coherence, and adherence to scientific writing standards. Resubmission for review is recommended after these revisions are made. If the necessary corrections are not implemented, the manuscript may not be acceptable for publication.

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Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Reviewer,

Thank you for your detailed feedback on our manuscript. We have carefully considered each of your comments and made significant revisions accordingly. Below is a summary of the modifications made:

Title and Abstract:
1. We have rewritten and summarized the abstract to reduce its length to a more appropriate level.
2. Keywords have been corrected, and we have ensured that no abbreviations are used.

Introduction:
3. Spelling and grammatical errors have been corrected, and "cholecystectomy" has been used consistently instead of "surgery."
4. The content of the text, including references, has been thoroughly reviewed and revised for accuracy and relevance.
5. The necessity of the study has been rephrased and aligned with the correct references.
6. The method description has been relocated to the appropriate section, and the objectives of the study have been clarified.

Methods:
7. Groups B and E have been referred to by their full names rather than abbreviations.
8. The mention of the flow diagram has been moved to the beginning of the results section, as per your suggestion.
9. We have added a description of the statistical analysis methods used in the study.
10. Statistical tests used have been explained, and appropriate analyses for data with repeated measurements have been implemented.

Results:
11. The results and discussion section has been rewritten to adhere to the principles of scientific writing.
12. We have avoided unnecessary repetition of results in the text, figures, and tables.
13. Many variables have been summarized in tables for clarity and conciseness.
14. Important numbers and results are presented in the text, with references to the tables for further details.
15. All p-values are reported with three decimal places.
16. The number of tables has been reduced to a more appropriate level, combining some tables where necessary.
17. We have used the full names of the groups instead of abbreviations to improve clarity.
18. Titles for each variable in the results section have been removed, following standard conventions.

Other:
19. The method and results have not been repeated in the discussion section, and we have focused on discussing the main findings of the article in light of other relevant studies.

We believe that these revisions have addressed the concerns raised and improved the overall quality and clarity of the manuscript. We appreciate your valuable feedback and look forward to resubmitting the revised manuscript for your further review.

Sincerely,

3 Revision 2

2 comments · 28 Apr 2024 – 1 May 2024

Associate Editor

ACCEPT 28 Apr 2024

Summary:
The manuscript compares the Baska mask and the endotracheal tube, two devices used for airway management during laparoscopic surgery. The study involved 50 patients undergoing laparoscopic cholecystectomy, randomly assigned to either device. Key data collected included demographic characteristics, physical status, heart rate, blood pressure, oxygen levels, and ease of device insertion. The study found no significant difference in BMI between the groups but noted significant differences in hemodynamic parameters. The endotracheal tube was associated with higher cardiovascular stress and throat irritation, while the Baska mask was easier and quicker to insert.
Strengths:
- The study addresses an important aspect of surgical procedures by comparing two commonly used airway management devices.
- The randomized design enhances the reliability of the findings.
- The manuscript provides clear and detailed data on hemodynamic parameters, which are crucial for patient safety during surgery.
- The findings contribute valuable insights into improving patient comfort and physiological outcomes during laparoscopic surgery.
Major Concerns:
- The sample size of 50 patients may be relatively small for generalizing the findings. Consideration of a larger cohort could strengthen the conclusions.
- The manuscript should provide more detailed statistical analysis and discussion on the clinical significance of the hemodynamic differences observed.
- It would be beneficial to include a discussion on potential limitations of the study, such as any biases in patient selection or device insertion techniques.
Minor Concerns:
- There are minor language issues, such as inconsistent spacing (e.g., "Baska maskwas" and "endotracheal tubeexhibited"). These should be corrected for clarity.
- Ensure all terms are consistently used throughout the manuscript (e.g., "Baska mask" vs. "Baska mask").
- Consider adding references to support statements about the devices' known effects or previous studies in the introduction or discussion sections.
Recommendation:
Accept with minor revisions. The manuscript presents valuable findings with practical implications for surgical practice. Addressing the minor language issues and expanding on the statistical analysis and discussion will enhance the manuscript's clarity and impact.

Editor-in-Chief

ACCEPT 1 May 2024

The manuscript is now acceptable in its current version and meets the journal's standards for publication. It is now ready to proceed to the final stages of publication.