



**SDI Review Form 1.6**

Journal Name:	<a href="#">International Journal of Medical and Pharmaceutical Case Reports</a>
Manuscript Number:	Ms_IJMPCR_34210
Title of the Manuscript:	<b>METASTATIC SIGMOID COLON CANCER PRESENTED AS INCARCERATED INGUINAL HERNIA – CASE REPORT</b>
Type of the Article	<b>Case study</b>

**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>)



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**PART 1: Review Comments**

	<b>Reviewer's comment</b>	<b>Author's comment</b> <i>(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)</i>
<b><u>Compulsory</u></b> REVISION comments		
<b><u>Minor</u></b> REVISION comments		
<b><u>Optional/General</u></b> comments	In this article (Ms_IJMPCR_34210: Case study METASTATIC SIGMOID COLON CANCER PRESENTED AS INCARCERATED INGUINAL HERNIA – CASE REPORT) the authors described a case report on a patients with groin hernia, where malignant lesion was present within hernia sac, Some authors believe that any non reducible inguinal mass that lacks a tactile impulse should rise suspicion of cancer. Data from the literature suggests that about fifth of all male patients with colorectal cancer have concurrent inguinal hernia or have had a repair of inguinal hernia 1-2 years prior to cancer diagnosis . Every malignant lesion found within hernia sac should be examined histologically.	Thank you for your comment. All sentences have been joined in one paragraph.