

PEER-REVIEW REPORT

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Title: Clinical significance of glyceimic parameters on venous thromboembolism risk prediction in gastrointestinal cancer

Reviewer's code: 03461976

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> [] High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> [Y] No	<input type="checkbox"/> [] Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

Venous thrombosis, including deep vein thrombosis and pulmonary embolism, is associated with well recognized exogenous and endogenous risk factors. Cancer patients have an increased risk of thrombosis due to a combination of factors including type of cancer, tumor size, surgery, presence of distant metastases, chemotherapy or hormonal therapies. Some studies indicated that venous thrombosis is associated with hyperglycaemia. However, diabetes or glucose metabolism are not presented as strong pro-thrombotic factors in epidemiological study. The authors investigated the effects of glyceimic parameters on venous thromboembolism risk in various gastrointestinal cancer. They concluded that the evaluation of glucose metabolic asset may allow for VTE risk stratification in GI cancer. The article is interesting, methods of the study are presented concisely and there are no objections about it. The study deals with an important problem of treatment strategy in the large group of cancer patients, though the small number of subjects tends to show preliminary character of the study and does not allow



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to draw population conclusions. Minor points The investigators presented a heterogeneous group of the gastrointestinal cancer patients enrolled in the study. What was the reason to include patients with different types of cancer in the study? It is surprising that the most common cause of VTE was colorectal cancer (table 12). How to explain the highest rates of VTE in these patients. VTE rates were higher in patients receiving bevacizumab (12 patients), but almost all patients received 5-fluorouracil and leucovorin (28 patients). Did the authors perform statistical analysis including 5-fluorouracil and leucovorin. In supplementary table 2 was presented 34 patients not 32, why?