

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 38556

Title: Efficacy and safety of endoscopic submucosal tunnel dissection for superficial esophageal squamous cell carcinoma and precancerous lesions

Reviewer's code: 02441437

Reviewer's country: Brazil

Science editor: Xue-Jiao Wang

Date sent for review: 2018-03-19

Date reviewed: 2018-03-23

Review time: 4 Days

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

COMMENTS TO AUTHORS

I have some considerations and questions - There have been changes in the way ESTD is performed over time (eg. advices, current type, use of CO2) - What are the reasons for the high number of R0 resection failures. (12 in the vertical margin and 3 in the lateral margin). - Discuss about the macroscopic aspects and lymphovascular invasion. - It is necessary to discuss the incidence of infections. Is the prophylactic antibiotic necessary? Should the protection of the airways be done in all cases?

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 38556

Title: Efficacy and safety of endoscopic submucosal tunnel dissection for superficial esophageal squamous cell carcinoma and precancerous lesions

Reviewer's code: 00071054

Reviewer's country: Japan

Science editor: Xue-Jiao Wang

Date sent for review: 2018-03-27

Date reviewed: 2018-04-02

Review time: 6 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input 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 checked="" 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 checked="" type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> 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"/> No	

COMMENTS TO AUTHORS

The authors sought to assess the efficacy and safety of endoscopic submucosal tunnel dissection (ESTD) in treating superficial esophageal squamous cell carcinoma and precancerous lesion in a relatively large sample. They concluded that this technique was effective and safe, with relatively high en bloc and complete resection rates, as well as low bleeding and perforation rates; however, the incidence of postoperative stricture and positive margin was high. I have some comments as follows. 1. High complete resection rate and high positive margin rate was contradictory. 2. There were no data on the pathological discordance between the pre- and post-ESTD specimens in the Abstract; therefore, the conclusions should be modified (page 2, line 17-19). 3. Continuous variables should be rounded to the first decimal place. 4. The average hospitalization expense should be converted into dollars. 5. Further management for 10 patients with

obstinate stricture should be described (page 12, line 1-2). 6. Gender difference was of no importance in this study (page 13, line 18-20). 7. The bleeding rate of 8.04% in this study was not low compared with that of ESD in the previous studies (0%-6%). Please specify the reason why the authors considered ESTD as a safe treatment method for these diseases (page 14, line 17-21).