

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38718

Title: Clinical update on the management of pseudopapillary tumor of pancreas

Reviewer's code: 00050849

Reviewer's country: Sweden

Science editor: Li-Jun Cui

Date sent for review: 2018-03-14

Date reviewed: 2018-03-18

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is a review on the management of solitary pseudopapillary neoplasms of the pancreas by Lanke G et al. Major points: I do not fully agree with the algorithm. Even if the suspicion is high at CT/MRI I would prefer to have an EUS/FNA performed in order to have histological verification of the lesion. On which data do the authors



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suggest 5 yrs follow up? The ENETS suggest 10 yrs f/u for the pancreatic NETs. SOX11, LEF1, TFE3, and AR that can be putative diagnostic markers in SPNs are not discussed. Minor points: I suggest that the word solitary will be added at the title. Not all the pancreatic NETs are immunostained with chromogranin A (eg insulinomas). Please rephrase. References 30, 47. Not all the letters are of same size. Reference 34. The name of the journal is missing where this reference was published (J Gastroenterol Hepatol). I suggest that representative microphotographs with β -catenin immunohistochemistry to be included. Introduction. Please add a space between the abbreviation (SPN) and pseudopapillary neoplasm. Last two lines of the Pathogenesis (Figure 1). Instead of () please use [] Immunohistochemistry. Please make it more clear about E-cadherin IHC. The authors use two abbreviations and two terms for pancreatic endocrine/neuroendocrine (PanNETs/PET) tumors. Please consider only one. Last line at the immunohistochemistry part. Please consider immunohistochemical staining or immunostaining and not immune histochemical staining. Clinical presentation at diagnosis please add a space between Type 3. Anastomotic and not anastomatic leak. Space between pancreaticoduodenectomy and (PPD). Lymph node and not lymphnode. Space between 2/14(6%) and 2/34(6%). The authors use abbreviations in terms that are used only once or twice, they should consider omitting these abbreviations.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38718

Title: Clinical update on the management of pseudopapillary tumor of pancreas

Reviewer's code: 02440977

Reviewer's country: Japan

Science editor: Li-Jun Cui

Date sent for review: 2018-04-09

Date reviewed: 2018-04-11

Review time: 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

It is good review article regarding SPN. However, revision is needed to improve it.

1. Are there any previous review articles regarding SPN like this paper? If so, please clarify any differences between this paper and former reports. If not so, please describe it in this paper.



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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38718

Title: Clinical update on the management of pseudopapillary tumor of pancreas

Reviewer's code: 02670181

Reviewer's country: Japan

Science editor: Li-Jun Cui

Date sent for review: 2018-04-09

Date reviewed: 2018-04-12

Review time: 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Comments on "Clinical Update on the Management of Pseudopapillary Tumor of pancreas" manuscript number 38718 Conclusion: Acceptable after major revision

In this paper, the authors well described the clinical and pathologic features of SPN.

This paper is very meaningful. However, there are some drawbacks in the paper at

present, I think. If the authors properly respond to the below-described comments, I would strongly recommend publication of this paper in "World journal of Gastrointestinal Endoscopy". Major points 1) The authors described the risk of

peritoneal carcinomatosis after EUS-FNA, especially in the case of pancreatic ductal adenocarcinoma (PDAC). However, I think that peritoneal dissemination of tumor cells more likely occur after EUS-FNA (or percutaneous needle biopsy) in the case of cystic tumor, since intratumoral pressure is supposed to be higher in the cystic tumor than in solid tumor like PDAC. Therefore, the authors had better describe the risk of peritoneal dissemination after EUS-FNA in the case of cystic tumor, using the literatures.

Or, the authors had better the EUS-FNA method (puncture point, puncture direction, or postpuncture compression) to avoid the peritoneal dissemination. 2) SPN occasionally recurs very lately after surgery (see "A systematic review of solid-pseudopapillary neoplasms: are these rare lesions?", *Pancreas* 2014, 43(3): 331-7. In this paper, the median time to recurrence is reported to be 50.5 months). The authors had better describe the importance of long-term observation after resection. Minor points

1) "Computed tomography" in the introduction part in Page 2 had better be "computed tomography" (small letter). 2) "Beta-catenin" in the introduction part in Page 2 had better be "beta-catenin" (small letter). Also, "Mutations in Beta-catenin gene" had better be "Mutations in beta-catenin gene". The authors use the word "beta-catenin" and "-catenin". They should be unified. 3) "exon-3 mutations" in the introduction part in Page 2 had better be "exon-3 mutations in beta-catenin gene". 4) "The aberrant Protein expression" in the introduction part in Page 2 had better be "The aberrant protein expression" (small letter). Similarly, many capitalized words, such as Pancreatic endocrine tumor, Acinar cell carcinoma, Renal cell carcinoma, exist in the manuscript. 5) "lead to Wnt signaling" in the introduction part in Page 2 had better be "lead to Wnt signaling activation". 6) The authors use words "p21" and "p21" ("p27" and "p27") in



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the sentences. They should be unified. 7) The words “Cytoplasmic nuclear expression” in page 4 may cause the readers’ confusion. Therefore, I recommend switch the sentence “Cytoplasmic nuclear expression of β -catenin and loss of E-cadherin” to “Nuclear β -catenin expression and membranous E-cadherin loss”. At the same time, the readers would not understand why E-cadherin loss occurs after nuclear translocation of beta-catenin. Therefore, the authors had better explain the mechanism (I know the fact that beta-catenin acts as anchoring of E-cadherin to the membrane.).

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BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38718

Title: Clinical update on the management of pseudopapillary tumor of pancreas

Reviewer's code: 00070310

Reviewer's country: Japan

Science editor: Li-Jun Cui

Date sent for review: 2018-04-09

Date reviewed: 2018-04-17

Review time: 7 Days

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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper reviewed SPT of the pancreas. This manuscript is well written. However it will require some revision before publication. 1, Please show how to select papers in this review. 2, Please impact new findings from this review. 3 Please summarize figures 4How do the authors define malignant SPN?



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