

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 43237

Title: Docetaxel, Cisplatin, and 5-fluorouracil (DCF) Compared with Epirubicin, Cisplatin and 5-fluorouracil (ECF) Regimens for Advanced Gastric Cancer: A Systematic Review and Meta-Analysis

Reviewer's code: 03317069

Reviewer's country: Japan

Science editor: Ruo-Yu Ma

Date sent for review: 2018-11-21

Date reviewed: 2018-11-23

Review time: 1 Day

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

SPECIFIC COMMENTS TO AUTHORS

I have read with great interest the article entitled "Docetaxel, Cisplatin, and 5-fluorouracil (DCF) Compared with Epirubicin, Cisplatin and 5-fluorouracil (ECF)



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Regimens for Advanced Gastric Cancer: A Systematic Review and Meta-Analysis". The authors showed that the DCF group was significantly better than the ECF group in terms of ORR and DCR. However, the incidence rate of grade 3-4 AEs was also greater in the DCF group than that in the ECF group, especially for neutropenia and febrile neutropenia. This is a carefully done study and the findings are of considerable interest. For the benefit of the reader, however, a number of points need modifying. These are given below. Comments Major point 1. The authors showed that the DCF group was significantly better than the ECF group in terms of ORR and DCR. What kind of reason do the authors think for these results? The authors should mention it in Discussion. 2. The authors used seven meta-analysis in this manuscript. However, the doses of anticancer agents were different in each study. Therefore, it seems to be difficult to analyze all together. Minor points 1.(Results, Toxicities) Figure4B→Figure6 2. The authors found high incidences of neutropenia and febrile neutropenia in the DCF group. How was the reduction or stop of anticancer agents performed?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
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- ☒ No

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[Y] No

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Reviewer's code: 00058052

Reviewer's country: Scotland

Science editor: Ruo-Yu Ma

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Review time: 15 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:
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		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The manuscript is a meta-analysis comparing two chemotherapy regimes in patients with advanced gastric cancer. The authors compared a number of outcomes including

survival, response rate and toxicity. This is an important clinical question and one which would benefit patients and doctors treating gastric cancer. The manuscript is very well written, structured and follows the appropriate format of a meta-analysis. The end-points are well described and recorded and the results are well presented. Conclusions drawn are reasonable and not overstated and the manuscript does therefore, add to the literature. I have only minor issues: Line 79: Patients have post-operative recurrence when diagnosed. This does not make any sense. I assume the authors mean that most patients present with advanced disease and many who are treated radically, develop recurrence. Figures 5 and 6 contain a large amount of information and therefore the font size is very small. The presentation of this should be improved. Overall, I feel that this is a high quality, well written manuscript.

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- ☐ No

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