

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 57092

Title: Artificial intelligence-assisted esophageal cancer management: now and future

Reviewer's code: 00071220

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-05-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-06-10 05:10

Reviewer performed review: 2020-06-10 05:49

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

I had the opportunity to review a paper “Artificial intelligence-assisted esophageal cancer management: now and future”, and I found very interesting. There is no problem to publish the manuscript.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 57092

Title: Artificial intelligence-assisted esophageal cancer management: now and future

Reviewer's code: 02708249

Position: Editorial Board

Academic degree: PhD

Professional title: Full Professor

Reviewer's Country/Territory: France

Author's Country/Territory: China

Manuscript submission date: 2020-05-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-06-21 19:31

Reviewer performed review: 2020-06-27 21:10

Review time: 6 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
<https://www.wjgnet.com>

SPECIFIC COMMENTS TO AUTHORS

This paper aims at providing a comprehensive review of artificial intelligence technology for esophageal cancer management. The abstract does not highlight and tell anything about the objectives of the paper. As far as the reviewer understands, this paper aims at providing a comprehensive review of artificial intelligence technology for esophageal cancer management. This should be mentioned in the abstract. Terms used for the literature search, the database retained as well as the period retained for this review should be mentioned in the abstract. The raw number of articles generated and the criteria used to reduce the total number should be mentioned in the abstract. Conclusions should be briefly mentioned in the abstract. Except the conclusions, all these points should be detailed in the introduction and elsewhere in the paper. The paper is not well organized. While many points are discussed, a flowchart could help the reader to understand the logic of the review. Starting from the raw number of papers found in the literature using the retained criteria to the final list discussed in the paper. Once the list of papers retained, the paper should be organized according to their content. Introduction: Esophageal cancer types retained for the review should motivated and discussed in the introduction. - Section: CLINICAL DIAGNOSIS AND THERAPEUTIC DECISIONS o Subsection: Diagnosis This subsection refers to AI based techniques used for EC diagnosis. Are these methods used in the clinical routine? If not, the title of the subsection is not appropriate. - Some of the abbreviations are not defined TNM, etc. AUR should be AUC (Area Under ROC Curve)

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 57092

Title: Artificial intelligence-assisted esophageal cancer management: now and future

Reviewer's code: 03010350

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2020-05-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-06-20 12:49

Reviewer performed review: 2020-07-01 11:52

Review time: 10 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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160, Pleasanton, CA 94566, USA
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<https://www.wjgnet.com>

SPECIFIC COMMENTS TO AUTHORS

I really like the idea of the authors and I also share it. In my opinion, the article is very useful, sooner or later these issues will be raised and published. The authors cite the latest data from PabMed and offer their vision of prospects. However, I remain in my position that the final diagnosis remains with the pathomorphologist. It would be ideal to be able to receive processed information during endoscopy and reliably based on it to conduct targeted biopsy with an accurate indication of malignant areas. I think the article will become even more significant if you add the prospect for a biopsy. Although, in the version as it is, it is already sufficient. Sharing interests with the authors (I try in cytopathology) I would really like this article to be printed.