

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 63986

Title: Neoadjuvant Chemotherapy without Radiation as a Potential Alternative Treatment for Locally Advanced Rectal Cancer: A Meta-analysis

Reviewer's code: 05402068

Position: Peer Reviewer

Academic degree: MD, MSc

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-02-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-15 01:52

Reviewer performed review: 2021-04-15 04:14

Review time: 2 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 Grade E: Do not publish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 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 type="checkbox"/> Accept (General priority) <input checked="" 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



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SPECIFIC COMMENTS TO AUTHORS

In the abstract, the number "60870" should be "60,870". Same in the Results section, 60870, 2908, and 57962 should be "60,870", "2,908" and "57,962". "13350" should be "13,350". Same as in the PRISMA flow chart, please modify those numbers too. I suggest the authors do not use the same English service company in the future as they could not even correct this. In the abstract, the comma after the word Colostomy in the results section should be typed in English mode not Chinese mode. I also suggest to add the exact data of HR and RR, 95%CI, P value of the main results to the abstract too.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 63986

Title: Neoadjuvant Chemotherapy without Radiation as a Potential Alternative Treatment for Locally Advanced Rectal Cancer: A Meta-analysis

Reviewer's code: 03468910

Position: Editorial Board

Academic degree: PhD

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-02-06

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Scientific quality	<input checked="" type="checkbox"/> Grade A: Excellent <input 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 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

The topic of this manuscript falls within the scope of World J. Gastrointestinal Oncology.

This study is a good meta-analysis for a total of 19 studies of 60,870 patients. Neoadjuvant chemo-radiotherapy (Neo-CRT) is the current standard strategy for treating locally advanced rectal cancer. This study compared the feasibility and efficacy of neo-adjuvant chemotherapy (Neo-CT) and Neo-adjuvant chemo-radiotherapy in patients with locally advanced rectal cancer. Neo-adjuvant chemotherapy (Neo-CT) decrease the incidences of anastomotic fistula and temporary colostomy, and increase the sphincter preservation rate. There were no significant differences in the overall survival, tumor down-staging rate, overall complications compared to Neo-adjuvant chemo-radiotherapy (Neo-CRT). It is a very interesting meta-analysis. I believe that this study is certainly of interest. Discussion and Statistical Analysis is good. Complete the References.