

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 72418

Title: Longitudinal changes in personalized platelet count metrics are good indicators of initial 3-year outcome in colorectal cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05198253

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Academic Research, Chief Doctor, Doctor, Research Scientist

Reviewer's Country/Territory: China

Author's Country/Territory: Hungary

Manuscript submission date: 2021-10-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-15 10:29

Reviewer performed review: 2021-10-26 09:31

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 Grade E: Do not publish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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Peer-reviewer
statements**Peer-Review: [☒] Anonymous [☐] OnymousConflicts-of-Interest: [☐] Yes [☒] No**SPECIFIC COMMENTS TO AUTHORS**

Good work, well done! This study involved 835 CRC patients with longitudinal data and multiple analysis methods. The results are interesting and convincing that demonstrated early detection of the pathological changes in pPLTD, pPLTS (new metrics), LMR, NLR, or HPR can be useful for oncologists to make a therapeutic decision. The only problem I am concerned about is that I notice many parameters are not available for near half of the patients of this study, such as Neutrophil-to-lymphocyte ratio and Platelet-to-lymphocyte ratio, which should be discussed properly in the limitation section. In addition, authors can improve their work's breadth by testing their findings in other published datasets.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03475479

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Hungary

Manuscript submission date: 2021-10-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-17 04:16

Reviewer performed review: 2021-11-18 08:51

Review time: 1 Day and 4 Hours

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 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
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Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

Authors retrospectively evaluated the value of the platelet count metrics in CRC patients. Authors the concluded the platelet count metrics is useful to follow the prognosis of CRC patients and helpful for therapy decisions. But its clinical usefulness was unclear due to its retrospective nature. In clinical setting, imaging studies are a key factor for decision making. The changes of tumor marker might be also useful to assess tumor growth. It is unclear whether the platelet count metrics are superior to imaging studies or tumor markers. Furthermore the platelet count metrics can be largely affected by chemotherapies or surgical intervention. Indeed, the pattern of patients with death was different as shown in Fig. 4A and B.