

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 74249

**Title:** Early gastric cancer presenting as a typical submucosal tumor cured by endoscopic submucosal dissection: A case report

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05194798

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Director

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2021-12-18

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-08 04:35

**Reviewer performed review:** 2022-01-10 08:30

**Review time:** 2 Days and 3 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No
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## SPECIFIC COMMENTS TO AUTHORS

This manuscript is a case report of a patient with early gastric cancer presenting as a submucosal tumor which was observed over 4 years and cured by endoscopic submucosal dissection. This is a rare case which includes informative information. The data are presented clearly and the discussion is well written. However, the following minor issues require clarification: Minor 1. Please provide diagnostic methods confirming the absence of H. pylori infection. 2. (P8L9) Is it correct that the histology was “well-differentiated”? 3. (Figure 4A) There are too many black triangles, which interfere the gross appearance. Please delete some of them. 4. (Figure 4B) Tumor seems invade to deep submucosa in Figure 4B, and I can’t find the area of minute submucosal invasion presented in Figure 4D. Please explain histopathologic findings regarding the depth of the tumor in more detail. 5. I recommend that the first half of the conclusion is described in the beginning of the Discussion section and the conclusion is more summarized.

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**Reviewer's code:** 03662955

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Chief Physician, Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2021-12-18

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-16 06:17

**Reviewer performed review:** 2022-01-16 07:29

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<b>Peer-reviewer statements</b>	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**

This is a well-written manuscript which reports a rare SMT-like gastric cancer cured by endoscopic resection alone. It is meaningful to help avoiding overtreatment for such SMT-like gastric cancers. Although the review of literatures for SMT-like gastric cancers in discussion was comprehensive and detailed, I recommend adding a table for sumarization of these articles. In conclusion, this manuscript is interesting and suitable for publication.

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**Peer-review model:** Single blind

**Reviewer's code:** 05469157

**Position:** Peer Reviewer

**Academic degree:** MM

**Professional title:** Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

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**Review time:** 10 Days and 2 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<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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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	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**

1. References should be newer in publishing time. There are 31 references cited in this manuscript, including 16 were twenty years ago, 7 were ten years ago, and only 8 were in the past ten years. 2. The treatment of ESD has been developed for many years, and was applied in many hospitals. Therefore, the authors should provide the newer information about ESD and cited in this manuscript for the readers. 3. This is a good case for SMT-like gastric cancer cured by ESD alone four years later after initial detection. Yes, I agreed the first and second conclusions mentioned by authors, but the third opinion is not new and created for ESD, EMR and EUS, in my view.