



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 76424

Title: CT-Based multiscale and multiphase Imaging Signature for the Quantitative Assessment of Patients With Carcinoma of the Esophagogastric Junction: Initial Differentiation between Squamous Cell Carcinoma and Adenocarcinoma

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05261046

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-03-16

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-16 01:59

Reviewer performed review: 2022-05-16 02:09

Review time: 1 Hour

Scientific quality	<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 Grade E: Do not publish
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



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Re-review	<input checked="" type="checkbox"/> Yes <input 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

Interesting and well written paper



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Peer-review model: Single blind

Reviewer's code: 05077783

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-03-16

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-18 10:45

Reviewer performed review: 2022-05-18 11:42

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
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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 authors describe a CT-based model for diagnosing the subtype of gastroesophageal junction neoplasms. This is an expanding area of research in gastrointestinal tumors, that is of significant scientific interest. Description of the methods used and of the results is very accurate and well-illustrated. The discussion and conclusion sections are supported by the results. The authors have published a similar article in 2019 (DOI: 10.1097/RCT.0000000000000826), but have greatly increased the study population and expanded on the radiomics model ever since. On page 4 line 3 there is a typing error ("contraindications or low tolerance").



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Peer-review model: Single blind

Reviewer's code: 05429162

Position: Peer Reviewer

Academic degree: MD, PhD

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

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-03-16

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-16 06:49

Reviewer performed review: 2022-05-24 12:21

Review time: 8 Days and 5 Hours

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 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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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

Du et al. analyzed CT-based multiscale and multiphase imaging for determination of squamous cell carcinoma of the esophagogastric junction from adenocarcinoma of the esophagogastric junction. Overall, the manuscript is significant contribution and I recommend that it be accepted for publication.



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Peer-review model: Single blind

Reviewer's code: 06109343

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: China

Manuscript submission date: 2022-03-16

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-17 01:14

Reviewer performed review: 2022-05-27 13:00

Review time: 10 Days and 11 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
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SPECIFIC COMMENTS TO AUTHORS

Comments The following points should be stated and answered clearly in the manuscript: Can these CT criteria replace upper endoscopy and biopsy for histopathological diagnosis? Can we recommend chemotherapy or advice certain type of operation depending only on these CT parameters with no or inconclusive histopathological diagnosis? If upper endoscopic biopsies were inconclusive can we depend on these CT parameters, or should we repeat the biopsy or recommend endoscopic ultrasound deeper biopsies? If these CT parameters can not replace tissue diagnosis, then what is the real benefit of this study? All these points should be stated and answered clearly in the discussion section and conclusions.