

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 87284

Title: Prognostic role of serum carcinoembryonic antigen in patients receiving liver resection for colorectal cancer liver metastasis: A meta-analysis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00058381

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Austria

Author's Country/Territory: China

Manuscript submission date: 2023-08-02

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-09-16 03:44

Reviewer performed review: 2023-09-16 14:25

Review time: 10 Hours

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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 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

SPECIFIC COMMENTS TO AUTHORS

Comments/Suggestions: (1) This manuscript deals with the prognostic role of serum Carcinoembryonic Antigen in patients receiving liver resection for colorectal cancer liver metastasis. It does not break new ground, but provides a meta-analysis of previous publications. (2) The evaluation is limited by the data available in the literature. (3) Further research on the cut-off value is needed. (4) Introduction, first paragraph, last sentence: "The incidence and mortality at 30 days after LR were reported to be 14-55% and 0-11.9%, respectively, with a 5-year survival rate of only about 30-50% and a recurrence rate of up to 60% [10-12], so it will be valuable to find appropriate prognostic markers to predict the outcome in CRCLM patients after LR." – The incidence of what? (5) Discussion, first paragraph, fifth sentence: "OS-and..." -> OS and... (6) Discussion, fourth sentence from the end of the first paragraph: "...it protects circulating colon cancer cells from death in the blood or prevents circulating cell death by inhibiting the anus..." – please clarify this statement. (7) Conclusion: "There correlation between CEA levels and survival." – This sentence is incomplete, please correct it. (8) Last sentence of the text: "Therefore, based on the results of this study, high preoperative or



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postoperative serum CEA levels were correlated with poor prognosis, especially poor OS, in CRCLM patients who have received LR." - "Therefore" should be omitted here. (9) Reference list: Capital letters should be used in journal names (and they should be abbreviated); e.g., "World journal of gastroenterology" -> World J Gastroenterol. (10) In parts, the format of the references is not consistent with the guidelines of the journal. (11) Figures and Tables: For the publications, the citation numbers corresponding to the reference list should be added. (12) Figure 1: There should be a colon (:) after "Duplicate records removed (n=2424)". (13) Figure 2: For the readers, it should be stated why "Arru" is contained twice. (14) Figure 2 and Table 1: There are publications by Reddy from 2008 and 2009 in Figure 2 and Table 1, but two by Reddy from 2009 in the reference list. (15) Figure 4: For the readers, it should be stated why "Kawahara" is contained twice.

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Reviewer's code: 01438831

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

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Reviewer chosen by: Yu-Lu Chen

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Review time: 8 Days and 6 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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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

This meta-analysis is significant in that it embodies what many surgeons feel is vague. While reading this manuscript, I would like to know the reason why elevated pre- and post-LR CEA levels were correlated with poor OS, DFS and RFS. It would be great if we could know the organ, timing, and form of recurrence in cases with high CEA compared to others. As for pre- and postoperative CEA, there might be some effects of neoadjuvant or adjuvant chemotherapy. In this meta-analysis, it would be difficult to make it clear, but if there are some papers, please show it in discussion.