PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 41453

Title: New metastasis lymph node classification for early gastric cancer should differ from those of advanced gastric adenocarcinoma: Results based on the SEER database

Reviewer's code: 02546253

Reviewer's country: Japan

Science editor: Jin-Lei Wang

Date sent for review: 2018-08-14

Date reviewed: 2018-08-17

Review time: 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[Y] Grade E: Do not publish		[Y] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors described the lack of the 8th TNM staging system with respect to N classification in early gastric cancer. They used the SEER data set in US and the FMUUH dataset of their own to calculate the overall survival rate in surgically-treated patients

with gastric cancer. The results were unique and important in some extent, but there are many criticisms for publication.   1. It is well known that the sixth and seventh edition of the AJCC staging system were not well distributed with respect to the survival curve for patients with EGC. Therefore, the present results are not so surprising.   2. The TNM staging system quite often differs from other staging systems based on the local cohorts because both characteristics of patients with gastric cancer and treatment strategies are not equivalent. For this reason, the version up is mandatory. The general rule to describe the staging is more important. 3. Data collecting periods from both SEER and FMUUH cohorts are long. Between 1997 and 2014, there are many epoch making events. Especially, chemotherapy and endoscopic excision are important. 4. The enrollment of patients in the FMUUH data set are unknown. The consort diagram is necessary. 5. The limitations which the authors stated in Discussion have to be emphasized in more detail at the beginning of Discussion. 6. In this study, the numbers of patients with T1N0 and T1N1 or more in the cohorts used are not described. If the number of T1N1 or more is small, the power of this study would be very limited. 7. The legends of figures must be more clearly stated for the readers.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

[   ] The same title

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[   ] Plagiarism

[Y] No

BPG Search:

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[   ] Plagiarism

[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 41453

Title: New metastasis lymph node classification for early gastric cancer should differ from those of advanced gastric adenocarcinoma: Results based on the SEER database

Reviewer's code: 01207071

Reviewer's country: Japan

Science editor: Jin-Lei Wang

Date sent for review: 2018-08-14

Date reviewed: 2018-08-23

Review time: 9 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[ ] Advanced
			[Y] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors demonstrated almost identical survival curves of pT1N1and pT1N2 or pT1N3a and pT1N3b gastric cancer patients in SEER cohort. From this finding, they proposed new staging system combining pT1N1and pT1N2, or pT1N3a and pT1N3b,

which showed better discrimination and they confirmed it in FMUUH data set. Generally, the study is well designed and clearly written.   p7 "a significant differences", p8 "nTNT" and "optima" need to be corrected.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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[   ] Plagiarism

[Y] No

BPG Search:

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[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 41453

Title: New metastasis lymph node classification for early gastric cancer should differ from those of advanced gastric adenocarcinoma: Results based on the SEER database

Reviewer's code: 00504218

Reviewer's country: Japan

Science editor: Jin-Lei Wang

Date sent for review: 2018-08-14

Date reviewed: 2018-09-01

Review time: 18 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[Y] Grade B: Very good	[ ] Grade B: Minor language polishing	[Y] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[ ] Advanced
			[ ] General
			[Y] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

In this retrospective study, Lin and colleagues developed a novel TNM staging system with a better predictive ability that can be used to accurately predict the 5-years OS of patients with early gastric cancer. Although this study has some limitations as they

noted, they analyzed a large number of cases and applied X-tile analysis with optimal cut-off point. The main statistical analysis is well described and will likely become a cited example of how to manage gastric cancer after surgery.   Minor point 1. In Table 1, total patients number of SEER set should be 10,714

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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[Y] No

BPG Search:

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[   ] Plagiarism

[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 41453

Title: New metastasis lymph node classification for early gastric cancer should differ from those of advanced gastric adenocarcinoma: Results based on the SEER database

Reviewer's code: 00057983

Reviewer's country: Taiwan

Science editor: Jin-Lei Wang

Date sent for review: 2018-08-14

Date reviewed: 2018-09-02

Review time: 19 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[Y] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[ ] Advanced
			[Y] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors raise their opinions of setting a new N category for early gastric cancer. This is a pioneer study. However, I have the following comments: 1. In the part of PATIENTS AND METHODS, please add the description of Exclusion criteria of patients. Besides,

please clarify the patients whether they have received neoadjuvant treatment first. 2. The main difference between old and new N categories for early gastric cancer is only on T1 group. However, in the new system, T1N3b was classified into category IIB instead of IIIB. What is the actual benefit of patients in the following decision-making process in choosing adjuvant treatment or not? 3. About the title of this manuscript, the word "CANCER" should be changed to "ADENOCARCINOMA".

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[Y] No

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[Y] No