

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05225448

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Xi-Fang Chen (Part-Time Editor)

Reviewer accepted review: 2020-10-30 04:06

Reviewer performed review: 2020-11-05 02:17

Review time: 5 Days and 22 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 Grade E: Do not publish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 checked="" type="checkbox"/> Accept (High priority) <input 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: <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

The authors report the short-term oncological outcome of neoadjuvant chemoradiotherapy followed by laparoscopic D2 gastrectomy were safe and effective in a locally advanced gastric cancer patient. I found this paper to be well-written and engaging. I was impressed the authors were well aware that no report had ever been published and thought as the author wrote this is first report regarding the safety and short-term oncological outcome of neoadjuvant chemoradiotherapy followed by laparoscopic D2 gastrectomy Major comments: 1. The authors described the adverse events according to CTCAE. 2. The figure was difficult to understand. Please correct the image to understand easily.

PEER-REVIEW REPORT

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Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05429162

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor, Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Xi-Fang Chen (Part-Time Editor)

Reviewer accepted review: 2020-10-30 04:41

Reviewer performed review: 2020-11-06 03:02

Review time: 6 Days and 22 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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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

Summary Liu et al. presented a clinical case with gastric cancer which was successfully treated with neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy. Although the manuscript well described about the examination and treatment process, there are some major point to be revised. Major points 1) Overall, the dates described on clinical course should be concealed. [Abstract] 1) There is a manuscript reporting the efficacy of neoadjuvant chemotherapy followed by D2 gastrectomy with locally advanced gastric cancer. Please refer this article (Kim et al. World J Gastroenterol. 2015 Mar 7;21(9):2711-8. doi: 10.3748/wjg.v21.i9.2711.) [Introduction] 1) The authors stated "Postoperative adjuvant chemoradiotherapy administration is restricted in some patients due to surgical complications", but there is no reference. Please show the clinical case reports, case series of review article showing the efficacy and disadvantages of postoperative chemoradiotherapy. [Case report] 2. Neoadjuvant chemoradiotherapy and evaluation 1) the preoperative staging was diagnosed as cT4NxM0 III. the N factor should be cleared using CT or other imaging modality. Also, the "III" should be "Stage III". 2) The authors stated "And because of the suspicion of lymph node metastasis, the systemic chemotherapy should be considered." Please clarify which and why lymph node metastasis was "suspicious". 3) In terms of showing BMI, the patient's height should be described. 4) Helicobacter Pylori infection status, history of Helicobacter Pylori treatment should be described. 5) The term "GTV" and "CTV" is not generally and widely used in the field of gastrointestinal oncology. Please spell out. 6) In the adverse event, the grading of adverse event should be described according to the Common Terminology Criteria for Adverse Events (CTCAE) v5.0

(https://ctep.cancer.gov/protocolDevelopment/electronic_applications/ctc.htm#ctc_50)

). There is no description method as " I°" or " II°". Please correct this term and cite the CTCAE version 5.0. 7) Although the indication for systemic chemotherapy is clearly described, the indication for radiotherapy is not clear. Please describe why the patient received the chemoradiation therapy instead of systemic chemotherapy only. 8) After the neoadjuvant chemoradiotherapy was completed, the staging was uT4 N1 M0. On the other hand, the staging before the chemoradiotherapy was T4 Nx M0. This may indicate that the neoadjuvant chemoradiotherapy is not effective as expected. Please clarify the staging after the chemoradiation therapy and reconsider the efficacy of this neoadjuvant chemoradiotherapy according to the RECIST guideline (Eisenhauer et al. Eur J Cancer. 2009. Jan;45(2):228-47. doi: 10.1016/j.ejca.2008.10.026.) 3. Surgery and postoperative recovery 1) The amount of transfusion is not clear. Please describe whether the patient received transfusion. 4. Postoperative histology 1) The treatment effect of the chemoradiotherapy should be noted according to the previous studies. (Ma et al. J Cancer Res Clin Oncol. 2020. Aug;146(8):2135-2142. doi: 10.1007/s00432-020-03214-w.; Wang et al. Ann Transl Med. 2019. Oct;7(20):546. doi: 10.21037/atm.2019.09.82.) [Discussion] 1) The authors discussed about the neoadjuvant chemotherapy and neoadjuvant chemoradiotherapy for advanced gastric cancer. To date, any study has not been proved the efficacy of neoadjuvant chemoradiotherapy, although the systemic neoadjuvant chemotherapy may have an indication for certain gastric cancer cases. Thus, it should clearly describe that the efficacy of radiotherapy in terms of molecular or pathological bases (i.e. Abscopal effect: Mole et al. Br J Radiol. 1953 May;26(305):234-41. doi: 10.1259/0007-1285-26-305-234.)

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05212394

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor, Lecturer

Reviewer's Country/Territory: Jordan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Xi-Fang Chen (Part-Time Editor)

Reviewer accepted review: 2020-11-01 04:03

Reviewer performed review: 2020-11-07 11:53

Review time: 6 Days and 7 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 checked="" type="checkbox"/> Accept (High priority) <input 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: <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 manuscript is well-written. However, please refer to some studies regarding the laparoscopic gastrectomy after neoadjuvant chemotherapy.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 03816367

Position: Peer Reviewer

Academic degree: MBChB

Professional title: Lecturer, Staff Physician

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Xi-Fang Chen (Part-Time Editor)

Reviewer accepted review: 2020-11-03 05:45

Reviewer performed review: 2020-11-17 06:12

Review time: 14 Days

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 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 type="checkbox"/> Accept (General priority) <input checked="" 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: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Reviewer Comments on WJCC Manuscript Number- 59492 The authors should be commended on selecting this particular case as it does give the reader insight into management of a clinically important presentation. The layout of the paper has been well thought through It would be useful if the authors could highlight the normal laboratory ranges for CEA, rather than stating 'slightly higher than normal' Is it necessary to mention dates? There seems to a delay to CT imaging of 6 days in a patient with incomplete obstruction? A few grammatical corrections are perhaps indicated e.g. not starting the sentence with ' And' (Page 5) It may be useful to tabulate the results from the various trials for easier read The sentence on Page 7 starting with the words 'Nor does the....' needs clarity, otherwise the impact of the statement will be weakened. The statement on non-specific surgical complications on Page 8 needs to be explained The authors have highlighted that with NACRT there is increased propensity to fibrosis hence performing dissection through challenging. Would the authors then suggest that in only a subgroup of cases should this treatment strategy (NACRT) be implemented? If this is suggested, what would be the selection criteria?

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05432230

Position: Editorial Board

Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Xi-Fang Chen (Part-Time Editor)

Reviewer accepted review: 2020-10-30 10:26

Reviewer performed review: 2020-11-17 18:06

Review time: 18 Days and 7 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
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 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

1. The manuscript were presented the safety and short-term outcome of laparoscopic gastrectomy with D2 lymph node dissection for patients after neoadjuvant chemoradiotherapy and the first case treated in this way. An original text in this respect.

2. The study is the first report to date on the safety and short-term oncological outcome of neoadjuvant chemoradiotherapy in one patient, followed by laparoscopic D2 gastrectomy. This is important study in terms of consequences and the absence of side effects. It is new treatment approach.

3. However, a single patient is quite insufficient to evaluate the effectiveness of this new approach. Very ambitious sentences were made in the conclusion section for the results obtained from a single patient. It can be written in a slightly softer style. The other corrections and suggestions are mentioned on the article, with attached

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 03816367

Position: Peer Reviewer

Academic degree: MBChB

Professional title: Lecturer, Staff Physician

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Man Liu (Part-Time Editor)

Reviewer accepted review: 2020-12-04 06:50

Reviewer performed review: 2020-12-04 06:56

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
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
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors have taken time to address all the concerns raised by the individual reviewers. They should be commended on this occasion.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

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Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05225448

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Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

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Reviewer performed review: 2020-12-04 07:02

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
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
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 manuscript has been revised well.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

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Reviewer's code: 05212394

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Academic degree: MD

Professional title: Doctor, Lecturer

Reviewer's Country/Territory: Jordan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Man Liu (Part-Time Editor)

Reviewer accepted review: 2020-12-05 08:23

Reviewer performed review: 2020-12-05 08:35

Review time: 1 Hour

Scientific quality	[<input checked="" type="radio"/>] Grade A: Excellent [<input type="radio"/>] Grade B: Very good [<input type="radio"/>] Grade C: Good [<input type="radio"/>] Grade D: Fair [<input type="radio"/>] Grade E: Do not publish
Language quality	[<input checked="" type="radio"/>] Grade A: Priority publishing [<input type="radio"/>] Grade B: Minor language polishing [<input type="radio"/>] Grade C: A great deal of language polishing [<input type="radio"/>] Grade D: Rejection
Conclusion	[<input checked="" type="radio"/>] Accept (High priority) [<input type="radio"/>] Accept (General priority) [<input type="radio"/>] Minor revision [<input type="radio"/>] Major revision [<input type="radio"/>] Rejection
Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No

SPECIFIC COMMENTS TO AUTHORS



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The manuscript has been improved. Changes done. Thank you.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Manuscript NO: 59492

Title: Neoadjuvant chemoradiotherapy followed by laparoscopic distal gastrectomy in advanced gastric cancer: a case report and review of literature

Reviewer's code: 05429162

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor, Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-14

Reviewer chosen by: Man Liu (Part-Time Editor)

Reviewer accepted review: 2020-12-04 02:52

Reviewer performed review: 2020-12-05 09:27

Review time: 1 Day and 6 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
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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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 manuscript has been revised well, and I agree that this manuscript showed the significance of preoperative chemoradiotherapy for gastric adenocarcinoma. I think this manuscript will be acceptable after some corrections have been done. I hope my comments would help improve the quality of the article. 1) In the case summary section on the abstract, the term “partial regression” should be changed as “partial response”. 2) In the introduction, the authors stated that “Postoperative therapy administration is restricted in some patients due to surgical complications because the recovery time may exceed the prescribed time period for treatment”. The reference 12 is just showing that the postoperative infection may cause the delay of the adjuvant chemotherapy. If you would like to show the recovery time will be exceeded due to the surgical complication on the gastrectomy, please add another reference. 3) In the laboratory examinations on case presentation, the tumor markers tested should be described. 4) In the imaging examinations on case presentation, the maximum thickness of the tumor site can be measurable. In the previous revised comment from the author, the author argued the wall thickness could not be measurable after the chemoradiation therapy. If that so, the efficacy of the chemoradiation therapy was partial response or complete response, according to the RECIST criteria. In this viewpoint, it seems to me that it is obvious that the efficacy of the chemoradiation therapy on this patient should be described according to the RECIST criteria. 5) In the imaging examinations on case presentation, the distant view of the lesion on Esophagogastroduodenoscopy should be presented. 6) In the imaging examinations on case presentation, the scope and ultrasonic diagnostic equipment used for EUS should be described. 7) In the multidisciplinary expert consultation section, the nutritional status was discussed. There were not any nutritional data, laboratory tests are presented except BMI. Please add another data showing that the patient’s nutritional condition was not good (i.e. serum albumin, Glasgow Prognostic Score, neutrophil-to-lymphocyte ratio). 8) In the treatment



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section, the grade 2 leucopenia was noted. Please fix II^o to grade 2 or any other standard description method. According to the CTCAE ver. 5.0, the leucopenia is non-standard term. Please use the term “White blood cell decreased”. 9) In the treatment section, the leucocyte increasing drug was administrated to the patient. Please describe the name of the drug. 10) In the treatment section, eternal nutrition was recommended for this patient. Please specify the nutritional management strategy the authors have taken (i.e. daily calorie intake, nutritional elements management). 11) In the discussion section, the authors discussed about the result of ARTIST and ARTIS-2 studies. These studies examined the efficacy of adjuvant chemotherapy or chemoradiation therapy after the D2 gastrectomy. The main theme of this case presentation is the efficacy of neoadjuvant chemoradiotherapy. The result of this studies was not directly applicable for this presentation. In addition, the efficacy of neoadjuvant chemoradiotherapy comparing neoadjuvant chemotherapy, should be discussed. 12) In the discussion section, the terms used for searching MEDLINE and EMBASE should be described.