



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Endoscopy*

Manuscript NO: 75211

Title: Hidden Local recurrence of colorectal adenocarcinoma diagnosed by Endoscopic ultrasound

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06116960

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: Egypt

Manuscript submission date: 2022-01-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-01 02:00

Reviewer performed review: 2022-02-02 09:31

Review time: 1 Day 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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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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
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SPECIFIC COMMENTS TO AUTHORS

This article has presented five case reports with submucosal recurrence after CRC resection during surveillance. It has provided a useful clinical note for some cases with difficult diagnosis due to irregular recurrence. Because of rare proportion, LCRCs with submucosal recurrence were often difficult to diagnose and manage. With EUS-FNA and/or EUS-FNB, LCRCs with submucosal recurrence can be diagnosed accurately, so that, avoid late applications of treatment strategies.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03474273

Position: Associate Editor

Academic degree: MD, PhD

Professional title: Chief Doctor, Director, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Egypt

Manuscript submission date: 2022-01-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-01 02:15

Reviewer performed review: 2022-02-04 06:18

Review time: 3 Days and 4 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 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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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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
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SPECIFIC COMMENTS TO AUTHORS

The case series described by hidden Local recurrence of colorectal adenocarcinoma diagnosed by EUS-FNA. Although important, the novelty is low. To preform EUS for submucosal tumor is the standrad procedure. 1. What types of ultrasonic endoscope did you use? Inserting the ultrasonic endoscope is difficult especilly for the right hemicolon. 2. What is the initial EUS imaging diagnoses for the 5 patients? If malignancy was suspected, combined with CT/MRI/PET-CT imagings, derict surgical resection can be performed. So why you perform EUS-FNA, if the serosal layer was broken, the risk of tumor seeding will increase. 3. The firures failed to clearly show the layers of digestive tract. The identification of ech laryer would be better.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 03474273

Position: Associate Editor

Academic degree: MD, PhD

Professional title: Chief Doctor, Director, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Egypt

Manuscript submission date: 2022-01-18

Reviewer chosen by: Li-Li Wang

Reviewer accepted review: 2022-04-29 13:09

Reviewer performed review: 2022-04-29 13:11

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
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I had no more comment. The case report was suitable for publishing in this journal.