



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Endoscopy*

**Manuscript NO:** 80310

**Title:** An update on endoscopic techniques for gastric neuroendocrine tumors

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06337392

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2022-09-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-10-01 20:26

**Reviewer performed review:** 2022-10-13 16:26

**Review time:** 11 Days and 20 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements	Conflicts-of-Interest: [ ] Yes [Y] No
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### SPECIFIC COMMENTS TO AUTHORS

In general, this review is well conducted and I would not change the scheme or the order of the paragraphs. I think it is precise and complete. Nevertheless, some minor comments are needed. I would quote and integrate the results of three other relevant and recent papers:

- “Borbath I, Garcia-Carbonero R, Bismukhametov D, Jimenez-Fonseca P, Castaño A, Barkmanova J, Sedlackova E, Kollár A, Christ E, Kaltsas G, Kos-Kudla B, Maasberg S, Verslype C, Pape UF. The European Neuroendocrine Tumour Society registry, a tool to assess the prognosis of neuroendocrine neoplasms. *Eur J Cancer*. 2022 Jun;168:80-90. doi: 10.1016/j.ejca.2022.03.007. Epub 2022 Apr 23. PMID: 35472579.”
- Sun W, Wu S, Han X, Yang C. Effectiveness of Endoscopic Treatment for Gastrointestinal Neuroendocrine Tumors: A Retrospective Study. *Medicine (Baltimore)*. 2016 Apr;95(15):e3308. doi: 10.1097/MD.0000000000003308. PMID: 27082572; PMCID: PMC4839816.
- Xue L, Cai Y, Chen W, Chen S, Xue P. Clinical Spectrum and Endoscopic Treatment of Gastrointestinal Carcinoid Tumour. *J Coll Physicians Surg Pak*. 2022 Oct;32(10):1330-1333. doi: 10.29271/jcpsp.2022.10.1330. PMID: 36205280. In chapter “Traditional EMR”, at line 4 (“EMR, as mentioned earlier, has a lower rate of incomplete resection”) please explain better what EMR is compared to. In chapter “Endoscopic Submucosal Dissection”, when you described the results of the study conduct by Kim et al. about the comparison between ESD and EMR, explain better the reasons of less affection of vertical margins in patients who underwent ESD. It is not clear. Please provide the entire meaning of LNM, I could not find in the text.



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**Peer-review model:** Single blind

**Reviewer's code:** 05759436

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2022-09-25

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-12-24 00:10

**Reviewer performed review:** 2022-12-24 00:24

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	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**

This narrative review was comprehensively updated the knowledge on the endoscopic treatment options to manage g-NENs.



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**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05352073

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Director, Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2022-09-25

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-12-19 15:39

**Reviewer performed review:** 2022-12-31 04:30

**Review time:** 11 Days and 12 Hours

<b>Scientific quality</b>	<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
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
<b>Creativity or innovation of this manuscript</b>	<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



<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

Dear author: Congratulations! You have given us an informative and detailed narrative article about Gastric neuroendocrine neoplasms, especially the classification and treatments. As a narrative review, although there is no knowledge gap, the detailed information in the manuscript is of substantial reference value for clinical physicians. However, there are some recommendations for you. For the title, I recommend to remove the word “novel” in the title, strictly speaking, the manuscript described numerous conventional endoscopic techniques as well. As an update on novel endoscopic techniques, I recommend that in the introduction part, it would be better to describe what is the conventional concept of treatment and what is the novel concept of treatment. That will make the manuscript more significant and logic. As the abstract consisted of “background”, “aim”, “method”, “results”, “conclusion”, the main text should also consist of such same parts. In the method part, it would be better to describe the literature searching method. As many endoscopic techniques were described. I recommend to have a table, illuminate the different characteristic of the three types of gNENs, such as, proportion, origin, malignant proportion, guideline for



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treatment, et al. as the article is pretty informative, only select key information in the table. That would be more helpful for the readers.