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March 19, 2023

Director Lian-Sheng Ma

Editorial Office Director, Company Editor-in-Chief, Editorial Office

Baishideng Publishing Group Inc.

E-mail: [l.s.ma@baishideng.com](mailto:l.s.ma@baishideng.com)

Dear Director and Company Editor-in-Chief Ma:

Thank you very much for your email with encouraging news regarding our manuscript. We also thank the editorial office and reviewers for the positive/constructive comments and suggestions, which truly help us to improve our manuscript. After incorporating these comments and suggestions in the revised manuscript, we would like to re-submit it for your consideration for publishing in World Journal of Gastroenterology. The amendments are highlighted in yellow in the revised manuscript, and the specific point-by-point responses to each of the Editorial Office's and reviewers' comments and suggestions are attached below.

Thank you again, and we hope that the revision is acceptable. We are looking forward to hearing from you soon.

Sincerely,

Jing Lv, Doctor

Honghui Hospital, Xi'an Jiaotong University

E-mail: [lvjing-1219@163.com](mailto:lvjing-1219@163.com)



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## EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

### **(1) Science editor:**

The manuscript has been peer-reviewed, and it's ready for the first decision.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

Thank you for your comments. Gastric cancer (GC) is a malignant disease with high incidence and mortality rates, and various risk and prognostic factors have been suggested. Besides, novel preventative and therapeutic strategies have been proposed, and immunotherapy has gained more attention. Therefore, in order to better inform the management of GC patients, this review aimed to discuss the epidemiology, risk and prognostic factors of GC with a focus on immunotherapy. According to the Editorial Office's and reviewers' comments and suggestions, we have made some modifications in the text accordingly, which are highlighted in yellow. Please refer to the revised manuscript for detailed information. Moreover, further language polishing for the revised manuscript was performed by a professional English language editing company, and a new language certificate was provided along with the revised manuscript. We hope that all grammatical, syntactical, formatting and other related errors were resolved, and the revised manuscript could meet the publication requirement (Grade A). If there still are some contents that need further amendments, please do let me know. We will revise it as soon as possible. Thank you again for your work and comments! We appreciate it very much!



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**(2) Company editor-in-chief:**

I have reviewed the Peer-Review Report, the full text of the manuscript, the relevant ethics documents, and the English Language Certificate, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted.

**Thank you very much for your positive comments! We appreciate it very much!**

I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

**Thank you very much for the revision. According to the Editorial Office's and reviewers' comments and suggestions, as well as the Criteria for Manuscript Revision by Authors, we have made some modifications in the text accordingly, which are highlighted in yellow. Please refer to the revised manuscript for detailed information. If there still are some contents that need further amendments, please do let me know. We will revise it as soon as possible. Thank you again for your work! We appreciate it very much!**

Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...".

**Thank you for your suggestion. We've reviewed and modified the figure legends in the text according to the guidelines of "Format for Manuscript Revision: Review" and "Guidelines and Requirements for Manuscript Revision: Review", which are highlighted in yellow. Please refer to the revised manuscript for detailed information. Thanks for your suggestion. We appreciate it very much.**



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Thank you for your notification. We've correctly indicated the reference sources and copyrights for figures in our revised manuscript. In addition, the documentation that the copyright holder has given permission for the figures to be re-published was given to the authors for this paper, which was uploaded along with the revised manuscript on the F6Publishing system. Thank you again for your notification! We appreciate it very much!

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Thank you again for your notification! We appreciate it very much!

Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript.

Thank you very much for your precious suggestion.

It is well recognized that gastric cancer (GC) is still a public health issue worldwide with decreasing trends in incidence and mortality. Various risk and prognostic factors have been suggested, and novel preventative and therapeutic strategies have been proposed. Therefore, in order to better inform the management of GC patients, we aimed to discuss GC epidemiology first, especially in China that have high GC incidence and mortality rates; then, we focused on the risk and prognostic factors of GC, as well as its immunotherapy. However, we couldn't agree with you more that it is necessary and much better to supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. Specifically, various factors could influence GC prognosis, including patient-related factors, tumor-related factors and treatment-related factors. Although surgery, chemotherapy, molecular targeted therapy, radiotherapy or combined modality treatment improved the survival of GC patients, these treatments have limited efficacies in treating patients with advanced GC, and potential therapeutic strategies are urgently needed for these advanced GC patients. A number of recent studies found that immune-based therapy for solid malignancies produced good results and significantly prolonged survival, and immunotherapy showed certain positive efficacies for GC patients compared to other traditional therapies, which may bring new hope to GC patients. There are three main



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immunotherapeutic options for GC, including immune checkpoint inhibitors (ICIs), cellular immunotherapy and cancer vaccines, which have gained more attention. Therefore, we focused on novel immunotherapies, especially ICIs, added relevant and latest research results to the text and discussed therapeutic strategies for the management of GC patients. Please find detailed information in our revised manuscript, which are highlighted in yellow.

It's quite important to add this content in the text in order to be more exhaustive. Furthermore, we will continue our study and focus on this certain specific issue of GC in future. If there still are some contents that need further supplements and amendments, please do let me know. We will revise it as soon as possible. Thank you again for your work and precious suggestion! We appreciate it very much!

To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

Thank you for your notification and suggestion. The *Reference Citation Analysis (RCA)* database is indeed the world's largest open-access and transparent academic science sharing platform focusing on citation analysis. The RCA's listing of "Today's Article" provides the latest literature information, and allows members to develop innovative academic thoughts with substantive relation to today's scientific landscape. I've already registered on the [referencecitationanalysis.com](https://www.referencecitationanalysis.com/), and been accepted as an official RCA Member. I enjoy browsing the RCA, and I think it will get more popularity when more



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scholars know it. Thank you again for your work and suggestion! We appreciate it very much!



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 82665

**Title:** Updates on global epidemiology, risk and prognostic factors of gastric cancer

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

**Peer-review model:** Single blind

**Reviewer's code:** 05085948

**Position:** Associate Editor

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor

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

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

**Manuscript submission date:** 2022-12-26

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-02-08 10:00

**Reviewer performed review:** 2023-02-12 12:44

**Review time:** 4 Days and 2 Hours

<b>Scientific quality</b>	<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
<b>Novelty 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 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 type="checkbox"/> Grade B: Good <input checked="" 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 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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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**

Despite the limited interest to the Eastern Countries, the review results in a complete examination of the various aspects in GC concern, even if all topics are treated too superficially, in my opinion.

Thank you very much for your revision and comments. We appreciate it very much.

It could be more useful if the Authors focused their interest on some limited and specific aspect of GC, in order to be more exhaustive.

Thank you very much for your precious suggestion.

It is well recognized that gastric cancer (GC) is still a public health issue worldwide with decreasing trends in incidence and mortality. Various risk and prognostic factors have been suggested, and novel preventative and therapeutic strategies have been proposed. Therefore, in order to better inform the management of GC patients, we aimed to discuss GC epidemiology first, especially in China that have high GC incidence and mortality rates; then, we focused on the risk and prognostic factors of GC, as well as



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its immunotherapy. However, we couldn't agree with you more that it could be more useful if we focused on some limited and specific aspect of GC. Specifically, various factors could influence GC prognosis, including patient-related factors, tumor-related factors and treatment-related factors. Although surgery, chemotherapy, molecular targeted therapy, radiotherapy or combined modality treatment improved the survival of GC patients, these treatments have limited efficacies in treating patients with advanced GC, and potential therapeutic strategies are urgently needed for these advanced GC patients. A number of recent studies found that immune-based therapy for solid malignancies produced good results and significantly prolonged survival, and immunotherapy showed certain positive efficacies for GC patients compared to other traditional therapies, which may bring new hope to GC patients. There are three main immunotherapeutic options for GC, including immune checkpoint inhibitors (ICIs), cellular immunotherapy and cancer vaccines, which have gained more attention. Therefore, we focused on novel immunotherapies, especially ICIs, added relevant and latest research results to the text and discussed therapeutic strategies for the management of GC patients. Please find detailed information in our revised manuscript, which are highlighted in yellow.

It's quite important to add this content in the text in order to be more exhaustive. Furthermore, we will continue our study and focus on this certain specific issue of GC in future. If there still are some contents that need further supplements and amendments, please do let me know. We will revise it as soon as possible. Thank you again for your work and precious suggestion! We appreciate it very much!

I think a deep language polishing should be made.

Thank you for the suggestion. According to the reviewers' and Editorial Office's comments and suggestions, we have made some supplements and modifications in the



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text accordingly, which are highlighted in yellow. Please refer to the revised manuscript for detailed information. Therefore, further language polishing for the revised manuscript has been performed by a professional English language editing company, and a new language certificate was provided along with the revised manuscript. We hope that all grammatical, syntactical, formatting and other related errors were resolved, and the revised manuscript could meet the publication requirement (Grade A). If there still are some contents that need further amendments, please do let me know. We will revise it as soon as possible. Thank you again for your work and suggestion! We appreciate it very much!



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**Peer-review model:** Single blind

**Reviewer's code:** 03478004

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2022-12-26

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-02-15 06:38

**Reviewer performed review:** 2023-02-17 13:24

**Review time:** 2 Days and 6 Hours

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

I think this is an excellent review article on gastric cancer. I don't see anything in need of corrections or additions.

**Thank you very much for your positive comments! We appreciate it very much!**