



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Oncology*

Manuscript NO: 84016

Title: Relationship between anal cancer recurrence and cigarette smoking

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01047751

Position: Editorial Board

Academic degree: MA

Professional title: Director, Statistician

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: United States

Manuscript submission date: 2023-02-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-02-24 09:50

Reviewer performed review: 2023-02-27 10:37

Review time: 3 Days

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 Grade E: Do not publish
Novelty of this manuscript	<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
Creativity or innovation of this manuscript	<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 creativity or innovation



Scientific significance of the conclusion in this manuscript	<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
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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

“Relationship of anal cancer recurrence and smoking” Comments on the paper by Kevin R McMahon et al submitted to the Review for World Journal of Oncology _____ Author : P.N. Lee Date : 27th February 2023 The authors describe the results of a study of 95 patients admitted to a single, community hospital with anal cancer between 2010 and 2021. I found the paper difficult to follow due to lack of detail presented. In the first place, the name of the hospital should be given directly in the paper, rather than being guessed from the affiliation of the authors. When was the information collected on whether the patients were never, former or current smokers? I imagine at the time the patients were originally admitted and diagnosed with the anal cancer, though this should be clarified. Also “smoking” of what? Cigarettes? Or does it include pipe and cigar smoking? It is noted that there was “non-response” for 37 of the 95 patients. What does this mean? Does this mean there was no follow-up of these patients, the patients coming in initially for the original diagnosis and treatment but never coming in again? What is the definition of recurrence and to which population does it apply? Recurrence sounds to



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me as if it can only apply to those who were thought to be cured after the initial diagnosis. Was this the case? As regards death, was it known for every patient whether they were dead or not by the end of the study period, even if the data were not available on the hospital records? Presumably it would be easy enough to find out whether a patient diagnosed in say 2012 with anal cancer had died by 2021, even if the hospital records did not contain the information. Would it not be of interest to analyze deaths certified as being from anal cancer as well as all deaths? The analyses of death and recurrence would be much better conducted using Cox regression with adjustment for age and sex. Clearly patients diagnosed in 2010 would have a much increased chance of dying by the end of the follow-up period (say 2020) than those diagnosed in 2021. The Cox regression would automatically take time to death into account. In the tables, p-values are given and bold fonts indicate “statistical differences from the other groups”. This is unclear. One can do tests to answer various different tests 1) Does the response vary between the 3 groups (on 2 degrees of freedom)? 2) Does the response vary between former and never smokers? 3) Does the response vary between current and never smokers? 4) Does the response vary between current and former smokers? 5) Does the response vary between current and former smokers combined and never smokers? What was the formal sequence of tests? Reading the Table 2 recurrence results for example, is one to infer that a bold figure for former smokers means that their recurrence rate is statistically different both from that of never smokers and from that of current smokers. This seems to be implied by the statement about bold font, but does not actually appear to be true? You have a variable called “response to therapy”. Would it not be of interest to compare death rates in those who did or did not respond to therapy? Details should be included (and taken into account) as to when the actual anal cancer was diagnosed, e.g. in grouped periods such as 2010-12, 13-15, 16-18 or 19-21 by smoking group. Finally I wonder whether the word “and” in the title of the paper



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should be replaced either by “to” or “with”.



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Manuscript NO: 84016

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Peer-review model: Single blind

Reviewer's code: 03258069

Position: Editorial Board

Academic degree: PhD

Professional title: Associate Professor, Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: United States

Manuscript submission date: 2023-02-23

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-03-21 12:36

Reviewer performed review: 2023-03-21 13:44

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
Novelty of this manuscript	<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
Creativity or innovation of this manuscript	<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 creativity or innovation



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Scientific significance of the conclusion in this manuscript	<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
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 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

Dear Author, thanks for the opportunity to review your paper. The issue is very interesting although the sample size do not allow definitive conclusions. HPV status is an essential factor in determining prognosis of anal cancer and response to treatment but unfortunately such data are unavailable. This is not negligible. In addition HPV infection is worsened by smoking habits. Please make more extensive comments on these aspects, including relevant references.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Clinical Oncology*

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Reviewer's code: 01047751

Position: Editorial Board

Academic degree: MA

Professional title: Director, Statistician

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: United States

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Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2023-05-11 07:08

Reviewer performed review: 2023-05-26 02:17

Review time: 14 Days and 19 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 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



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SPECIFIC COMMENTS TO AUTHORS

It is now basically fine following the revisions made. The only corrections I think should be made relate to making it clearer that "smoking" refers to "cigarette smoking". I think the following corrections should be made: Abstract: Background. Final sentence should end "...recurrence and cigarette smoking." Abstract: Aim. Add "cigarette" before "smoking status" Tables 1, 2 and 3. In the heading, replace "Tobacco use" by "Cigarette smoking" That is all.