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# PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 48400

Title: CURRENT STATUS OF THE GENETIC SUSCEPTIBILITY IN ATTENUATED

ADENOMATOUS POLYPOSIS

Reviewer's code: 00070758 Position: Editorial Board Academic degree: PhD

**Professional title:** Assistant Professor

Reviewer's country: Bulgaria

Science editor: Ya-Juan Ma

Reviewer accepted review: 2019-06-10 10:53

Reviewer performed review: 2019-06-23 10:00

**Review time:** 12 Days and 23 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept	Peer-Review:
[ ] Grade B: Very good	[ Y] Grade B: Minor language	(High priority)	[Y] Anonymous
[Y] Grade C: Good	polishing	[ ] Accept	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
[ ] Grade E: Do not	language polishing	[Y] Minor revision	topic of the manuscript:
publish	[ ] Grade D: Rejection	[ ] Major revision	[Y] Advanced
		[ ] Rejection	[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[ Y] No

# SPECIFIC COMMENTS TO AUTHORS

Comments to the Author The paper by Víctor Lorca and Pilar Garre, named "Current



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status of the genetic susceptibility in attenuated adenoma polyposis" is a minireview paper, aiming to present the current knowledge on the genetics of AP. It's an interesting paper. I strongly believe that a large auditorium of oncologists would be interested by this review. Following revisions and resubmission, this article is potentially suitable for publication. Page 6 line 24 - region starts from codon 177 check sources (genereviews, ncbi) Page 12 line 7 - typo, should be gliomas Page 13 line 28 – needs citation Page 14 line 21 - typo, should be alterations Page 16 discussion – the first sentence claims that the guidelines have been conservative, while the second claims that the criteria are lax. The second sentence should be revised, as it confuses the reader if the current criteria for genetic testing of AAP are strict or not. It's also unclear why would the authors recommend stricter clinical criteria, as multigene panel testing by itself always produces unclassified variants. If I understand this correctly, the authors recommend that the minimal number of adenomas required for genetic testing should go from 10 to 20. However, they do not clarify how that would benefit neither the patient, nor further genetic studies in the field. The sentence could be changed to: "Nevertheless, the decline in diagnosis rates that comes with the decrease in the adenoma burden shows the necessity of stricter clinical criteria when genetic testing is recommended for AAP predisposition genes."

# INITIAL REVIEW OF THE MANUSCRIPT

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Reviewer's code: 03726486 Position: Editorial Board Academic degree: PhD

**Professional title:** Professor

Reviewer's country: China

Science editor: Ya-Juan Ma

Reviewer accepted review: 2019-06-27 08:09

Reviewer performed review: 2019-07-17 08:07

**Review time:** 19 Days and 23 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept	Peer-Review:
[Y] Grade B: Very good	[ Y] Grade B: Minor language	(High priority)	[Y] Anonymous
[ ] Grade C: Good	polishing	[ ] Accept	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
[ ] Grade E: Do not	language polishing	[Y] Minor revision	topic of the manuscript:
publish	[ ] Grade D: Rejection	[ ] Major revision	[ ] Advanced
		[ ] Rejection	[Y] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[ Y] No

# SPECIFIC COMMENTS TO AUTHORS

This is a review article. The authors reviewed the genetic susceptibility in attenuated



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adenomatous polyposis. AAP is a heterogeneous syndrome in terms of clinical manifestations, heritability and etiology of the disease. Genetic heterogeneity and low penetrance alleles are probably the best explanation for this variability. The predisposition genes including APC, MUTYH, POLE, NTHL1, MSH3, MLH3 and other candidate genes have been discussed in this article. Overall, the topic of the review article is well chosen. minor: 1. For each predisposition gene mentioned in this article, most of them have only been discussed in mutant types of the genes involved. Rarely did authors describe the mechanism of how gene mutant cause AAP.

# INITIAL REVIEW OF THE MANUSCRIPT

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