



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 48455

**Title:** Frequency, localization, and types of gastrointestinal stromal tumor-associated neoplasia

**Reviewer's code:** 02441209

**Reviewer's country:** Italy

**Science editor:** Ruo-Yu Ma

**Reviewer accepted review:** 2019-05-21 19:17

**Reviewer performed review:** 2019-06-04 09:46

**Review time:** 13 Days and 14 Hours

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 Grade E: Do not publish	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

**SPECIFIC COMMENTS TO AUTHORS**

Very good review. Methodology is rigorous, all the relevant papers have been included in the analysis. Results are concise and straightforward. Discussion is clear and well organized. Few words are misspelled.



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#### INITIAL REVIEW OF THE MANUSCRIPT

##### *Google Search:*

- The same title
- Duplicate publication
- Plagiarism
- No

##### *BPG Search:*

- The same title
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- No



## PEER-REVIEW REPORT

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

**Manuscript NO:** 48455

**Title:** Frequency, localization, and types of gastrointestinal stromal tumor-associated neoplasia

**Reviewer's code:** 03534063

**Reviewer's country:** United Kingdom

**Science editor:** Ruo-Yu Ma

**Reviewer accepted review:** 2019-06-05 06:06

**Reviewer performed review:** 2019-06-09 16:41

**Review time:** 4 Days and 10 Hours

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

### SPECIFIC COMMENTS TO AUTHORS

Interesting and well written paper. Some minor points be helpful to clarify. 1. Over what time frame are the tumours being considered as a second neoplasia. Is it any within that patients lifetime? Please clarify. 2. Please give the numbers and rate of



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synchronous tumour (?10%) as this is of clinical relevance for patients diagnosed with GIST and if we should be considering further investigation for a second lesion at time of diagnosis. Please also specify rates of GI-Tract and urogenital tract synchronous rates.

3. In discussing the 4 studies with mutational status of the patients with a second neoplasia please specify that this is in keeping with normal GIST mutational frequency or add a sentence on this in the discussion.

4. Please make the discussion more concise and in particular needs reference to the clinical relevance, especially in the context that multiple primary tumours are known to occur in 2-17% of patients.(<https://esmoopen.bmj.com/content/2/2/e000172.info>) of patients and is already known to be highest in genitourinary and GI tract malignancies. I would focus on the synchronous tumours as this is interesting and clinically useful.

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