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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 51356

Title: Primary tumor location and survival in colorectal cancer: a retrospective cohort study

Reviewer's code: 03551828

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's country: Japan

Author's country: United States

Reviewer chosen by: Artificial Intelligence Technique

Reviewer accepted review: 2019-09-21 01:43

Reviewer performed review: 2019-10-03 15:05

Review time: 12 Days and 13 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 type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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FIRE-3 which comprised of FOLFIRI-back bone regimen indicated tumor sidedness as a predictive role and also CALGB80405 did as well regardless the trial included mixed backbone regimen (FOLFIRI and FOLFOX). It feels too strong that current study concluded tumor location has no predictive role for treatment with cetuximab versus bevacizumab in combination with 5-fluorouracil-based chemotherapy. In current study, about 70% patients were not evaluated for expanded RAS mutations. KRAS exon3,4 and NRAS mutations may affect study results.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 51356

Title: Primary tumor location and survival in colorectal cancer: a retrospective cohort study

Reviewer's code: 02533298

Position: Editorial Board

Academic degree: BSc, FRCP (C), MD, MSc

Professional title: Associate Professor

Reviewer's country: Canada

Author's country: United States

Reviewer chosen by: Artificial Intelligence Technique

Reviewer accepted review: 2019-09-19 16:01

Reviewer performed review: 2019-10-04 15:17

Review time: 14 Days and 23 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 type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The results presented in this real world database, although supporting the prognostic role of sidedness of colorectal cancer, contrasts to previously published post hoc analysis of randomized trials which suggest a predictive effect of sidedness of the use of EGFRi versus VEGF inhibition dependent upon tumor location. The possible reasons behind this variation are less clear. Although the chemotherapy backbone could certainly be considered a possible explanation, this wouldn't be supported by the post-hoc data of the randomized trial data as this effect was seen with both a FOLFIRI or FOLFOX backbone. One has to then question more the other inherent biases with collecting retrospective data but also the application of trial results into daily practice. For example, does one lose the beneficial effect of a therapy if the protocol is used in an ECOG PS 2 or 3 patient; this may be more exaggerated adding a biologic therapy which can significantly add to the toxicity of the chemotherapy backbone. In this real world data, there were also a significant amount of patients who were untested for NRAS or BRAF mutations. I agree that a further randomized prospective studies should be considered to answer this questions, but realistically given the acceptance of the current post hoc randomized data are those studies feasible and will they be supported.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☒ No

BPG Search:

- ☐ The same title



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[] Plagiarism

[Y] No