



### PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Oncology

**Manuscript NO:** 58557

**Title:** Predictive factors for early distant metastasis after neoadjuvant chemoradiotherapy in locally advanced rectal cancer

**Reviewer's code:** 00112190

**Position:** Peer Reviewer

**Academic degree:** BSc, MD

**Professional title:** Associate Professor

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

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2020-09-10

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-09-10 13:08

**Reviewer performed review:** 2020-10-01 04:46

**Review time:** 20 Days and 15 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<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 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
<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



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#### **SPECIFIC COMMENTS TO AUTHORS**

• Please indicate the distance from the anal verge of the rectal tumours. In Table 1 – please defined the tumour location i.e. distal, mid and proximal rectum based upon distance form anal verge. • Please indicate the reason for the limited MRI and FDG PET assessment at baseline with regard to local and distant staging? “Magnetic resonance (MR) imaging of the rectum was taken in 91 patients (71.1%) and whole-body 18F-fluorodeoxyglucose positron emission tomography with CT (PET-CT) was taken in 90 patients (70.3%)”. • The reason for approx. 50% of patients not receiving post-operative adjuvant chemotherapy: • Had the five patients that showed distant metastasis at their first evaluation after NACRT- had they undergone FDG PET at baseline? • Approximately 25% of patients did not proceed with surgery- how does compare to the literature? • Table 5 would be best updated with the recent phase III trials reported at ASCO 2020 in this regard.



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**Name of journal:** World Journal of Gastrointestinal Oncology

**Manuscript NO:** 58557

**Title:** Predictive factors for early distant metastasis after neoadjuvant chemoradiotherapy in locally advanced rectal cancer

**Reviewer's code:** 02844448

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2020-09-10

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-09-28 19:35

**Reviewer performed review:** 2020-10-06 07:42

**Review time:** 7 Days and 12 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>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" 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



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This study seems to be on the pathological factors that predict distant metastasis alone. The title may be adjusted to indicate this. The 10 treated with intensity modulated radiation cannot translate to 10% of the population. What is the preferred adjuvant chemotherapy for the patients that received systemic therapy? Your stated first follow up at 6-8wks clashes with the time of surgery. Was the survival duration calculated from date of surgery or chemo-radiation? What categories of differentiation were the tumors in the population studied? Mention was made of only the 3 that were poorly differentiated. MRI was not done for all patients. This would affect the conclusions from the study if applied to the general population. Surgical treatment also varied. Therefore not all patients studied had standard treatment. Duration of follow up should be more detailed. Your discussion should be more specific to the topic and your literature search on similar studies. This has made it difficult to relate your conclusion with your study.



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**Name of journal:** World Journal of Gastrointestinal Oncology

**Manuscript NO:** 58557

**Title:** Predictive factors for early distant metastasis after neoadjuvant chemoradiotherapy in locally advanced rectal cancer

**Reviewer's code:** 03726486

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Professor

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

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2020-09-10

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-09-29 16:06

**Reviewer performed review:** 2020-10-15 15:28

**Review time:** 15 Days and 23 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<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



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what are the original findings of this manuscript?