

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64590

Title: Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic population

Reviewer's code: 05113803

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2021-03-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-03-26 19:53

Reviewer performed review: 2021-03-27 14:39

Review time: 18 Hours

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 Grade E: Do not publish
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 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

The major concerns about this manuscript are as below; First, the abstract should be shortened. The number of words is 397. Second, the introduction of main body seems to be lengthy. It consists of eight paragraphs. The part of sixth paragraph is not necessary for the manuscript. The seventh paragraph about ABC method can be corrected because the authors did not classify the enrolled patients according to serum PG I ≤ 70 ng/mL and PG I/I ratio ≤ 3.0 . Third, 'nasal endoscopy' is wrongly written. It should be corrected to 'transnasal gastroscopy'. Fourth, the authors describe that endoscopic surveillance can reduce the incidence of gastric cancer. However, it means the secondary prevention rather than primary prevention. Fifth, there is no Table about the baseline characteristic of study population. Sixth, previous studies have reported that serum PG levels were associated with the severity of gastric atrophy (BMC Gastroenterol 2017;17(1):88 and Scand J Gastroenterol 2017;52(8):822-827). Using a receiver operating characteristic analysis, optimal cutoff values for diagnosis of high risk OLGA/OLGIM are required to demonstrate the clinical implications of this study. Lastly, the numbers of OLGA and OLGIM group IV are too small to be performed statistically. It may be appropriate to categorize group IV into high risk with group III.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64590

Title: Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic population

Reviewer's code: 00503433

Position: Editorial Board

Academic degree: PhD

Professional title: Full Professor, Professor, Senior Scientist

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2021-03-26

Reviewer chosen by: AI Technique

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Reviewer performed review: 2021-04-03 10:09

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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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" 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



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SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled: "Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic physical examination population: A cross-sectional study" has evaluated serum PG I/II levels of asymptomatic Chinese subjects undergoing health screening and correlated them with the level of gastric pathology, as observed in the gastric specimens obtained through nasal gastroscopy. The strengths of the studies include the large sample size (n = 1922) obtained from multiple (nine) health centers across the country. However, the data are poorly analyzed and concluded. The manuscript will be greatly strengthened by presenting the following: - Table of demographic and clinicopathologic characteristics, as well as H. pylori sero-status -

Combined assessment and categorization of subjects based on PG I, II, I/II ratio and H. pylori sero-status - Determination of OLGA and OLGIM scores in the above categories - Exclusion of GC subjects from the above analysis - Statistical correlation analysis - ROC curve analysis and determination of sensitivity, specificity and accuracy of the serologic variables - Conclusion of the efficacy of the above assays as a non-invasive measure of determining gastric atrophic/metaplastic changes based on the above findings

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64590

Title: Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic population

Reviewer's code: 02535775

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2021-03-26

Reviewer chosen by: AI Technique

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Review time: 6 Days and 3 Hours

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
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 checked="" type="checkbox"/> Yes <input 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

This study titled “ Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic physical examination population: A cross-sectional study ” was reviewed. This multi-center study is interesting and valuable. However, this study needs some corrections. When looking at all the discussion of this study and literature referred by the authors, *Helicobacter Pylori* (HP) positivity and lower levels of Pepsinogen -I (PGI) are the risk factors for gastric atrophy and finally gastric cancer (GC). However, HP positivity is also related to the increasing level of PGI. Some results are discordant. HP positivity is related to PGI levels increased and GC. Serum PGI levels decreased are also the risk factors for GC. Firstly, the authors should explain this discordance in the discussion. Secondly, determining cut-off values with ROC analysis of PGI and PGR for OLGA-stage 1 or OLGA stage 1+2 groups while comparing OLGA-stage 0 without looking at HP positivity will be more impressive in your study. Because the number of patients is not sufficient to evaluate the patients with HP positive and those with HP negative. This study deserves to publish in WJG after corrections. Please check these comment and rewrite again please,

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64590

Title: Evaluation of serum pepsinogen on the degree of gastric mucosal atrophy in an asymptomatic population

Reviewer's code: 05113803

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2021-03-26

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-05-08 02:48

Reviewer performed review: 2021-05-08 08:33

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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 type="checkbox"/> Accept (General priority) <input checked="" 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

SPECIFIC COMMENTS TO AUTHORS

The revised manuscript was well written after point-by-point revision. Two minor issues are required to be corrected. First, the authors classified OLGA I and II groups into medium risk. However, 'low risk' may be appropriate to be described in comparison with high risk group of OLGA III and IV. Second, the point of cutoff values should be indicated in the graphs of Figures 1 and 2.