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### CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number: 5

Manuscript word count: 990

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
	Name of journal: World Journal of Diabetes	
	Manuscript NO.: 68980	
	Column: Letter to the Editor	
	Title: Letter to editor 'Gastroenteropathy in gastric cancer patients	
1	concurrent with diabetes mellitus'	[Y]
	Authors: Yu-Xi Cheng, Wei Tao, Wei Zhang and Dong Peng	
	<b>Reviewer code:</b> 05194798, and 05468022	
	First decision: 2021-07-15 18:27	
	Scientific Editor: Jia-Ru Fan	
	Date of signature: September/23/2021 (month/day/year)	
	Editorial Office's Comments	
	Science Editor: 1 Scientific quality: The letter to editor analyze the	
2	relationship of the gastric cancer, diabetes mellitus and	
	gastroenteropathy, and how the occurrence of the symptoms might	[Y]
	be due to not only cancer but also the complications of diabetes	
	mellitus. The topic is within the scope of the WJG. (1)	
	Classification: Grade E and Grade C (2) Summary of the	
	Peer-Review Report: Marcio JCZ et al. of "Diabetic	



# **Baishideng Publishing**

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gastroenteropathy is a general overview of on the pathophysiology, symptoms, diagnosis, and treatment of diabetic gastroenteropathy while authors of the letter are pointing towards a separate point of gastric cancer, diabetes melitus and gastroenteropathy which is not even mentioned in the Marcio JCZ review article. The language of letter is vagues and does not convey any new information which was not known previously in the literature. This manuscript is a letter to editor that suggested the relationship of gastric cancer (GC), diabetes mellitus (DM) and gastroenteropathy. The authors found that gastroenteropathy was generally observed in patients with concurrent GC and DM, and some of the symptoms due to gastroenteropathy had remission after gastrectomy. The authors guessed that radical resection of GC as well as DM remission after gastrectomy may relieve these symptoms. This point of view is novel and interesting, which will be of interest to clinicians in the field. Further studies are expected in the future. However, the following minor issues need to be addressed: 1. I think the authors substantially stated the relationship between gastroenteropathy due to DM and gastrectomy. Is it necessary to limit the object to patients with GC? 2. Please replace RCT with "randomized controlled trial". (3) Format: there are no figures or tables. (4) References: A total of 5 references are cited, including 4 references published in the last 3 years; (5) Self-cited references: There is 1 self-cited references. Language evaluation: Classification: Grade C and Grade B. A language editing certificate issued by AJE was not provided.



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Academic norms and rules: The signed Conflict-of-Interest Disclosure Form and Copyright License Agreement were not provided. No academic misconduct was found by the Google/Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJG. 5 Issues raised: (2) The language classification is Grade C. Please visit the following website for the professional English editing that language companies recommend: https://www.wjgnet.com/bpg/gerinfo/240; (7) PMID numbers are missing in the reference list. Please provide the PubMed numbers DOI to the reference list and list all authors of the references. Please revise throughout; 6 Re-Review: Required. 7 Recommendation: Conditional acceptance.

Company Editor-in-Chief: I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Diabetes, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. However, the quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional



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	English language editing companies we recommend:	
	https://www.wjgnet.com/bpg/gerinfo/240.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	
	not too long (no more than 18 words). Words such as 'exploration',	
4	'research', 'analysis', 'observation', and 'investigation' are avoided.	[Y]
	The title does not start with 'The' and does not include any Arabic	
	numbers or uncommon abbreviations.	
5	A short running title is provided (no more than 6 words).	[Y]
	The authors' full family (sur)names and full/abbreviated first	
6	names are listed on the title page and are consistent with those	[Y]
	listed in the signed BPG Copyright License Agreement form.	
	The 'Author contributions' passage describes the specific	
	contribution(s) made by each author. The author's names are listed	
	in the following format: full family (sur)name followed by	
	abbreviated first and middles names.	
	e.g., "Wang CL and Liang L contributed equally to this work; Wang	
7	CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the	[Y]
	research study; Wang CL, Zou CC, Hong F and Wu XM performed	
	the research; Xue JZ and Lu JR contributed new reagents and	
	analytic tools; Wang CL, Liang L and Fu JF analyzed the data; and	
	Wang CL, Liang L and Fu JF wrote the manuscript. All authors	
	have read and approve the final manuscript."	
	The 'Supported by' statement describes the source(s) of financial	
8	support and includes the corresponding identification number(s)	[N]
	and program ID(s) if available, and contains no spelling errors.	
	The 'Corresponding author' passage provides the corresponding	
9	author's full first and family (sur)names, abbreviated title (e.g., MD,	[Y]
	PhD), affiliated institute's name and complete postal address	[+]
	(including zip code) and e-mail (written in all lowercase), and	



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	contains no spelling errors.	
10	The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.	[Y]
11	The Abstract section is formatted according to the article-specific style (structured $vs$ unstructured) and word count thresholds, as follows:  Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight:  Non-structured abstract that is no less than 200 words.  Field of Vision, Case Report and Letter to the Editor:  Non-structured abstract that is no less than 150 words.  Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).	[Y]
12	The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized, and each keyword is separated by a semicolon.	[Y]
13	The "citation" contains authors' names and manuscript title. The name of the first author should be typed in bold letters; the family (sur) name of all authors should be typed with the first letter capitalized, followed by their abbreviated first and middle initials. For example, an article by Jae Moon Yoon, Ki Young Son, Chun Sick Eom, Daniel Durrance, Sang Min Park will be written as Yoon JM, Son KY, Eom CS, Durrance D, Park SM. Pre-existing diabetes mellitus increases the risk of gastric cancer: A meta-analysis. <i>World J</i>	[Y]



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	Gastroenterol 2019; In press	
14	The 'Core tip' provides a summary (less than 100 words) of the study that outlines the most innovative and important arguments and core contents of the paper and will serve to effectively attract readers.	[Y]
15	The 'INTRODUCTION' section clearly describes the relevant background information for the study. Only the most relevant and current (within the past 5 years) literature is cited, with the exception of rare instances of seminal literature citations. All technical terms and/or abbreviations are explained and/or defined, with the full name of abbreviations given upon first appearance in the text and the abbreviation presented in parentheses [i.e., "computed tomography (CT)"]. First-person pronouns (e.g., 'T, 'we') are used appropriately to clearly indicate the work performed by the author(s). When weaknesses of previous studies are described in the text to highlight the innovations related to the current study, the information is presented carefully.	[N]
16	The 'MATERIALS AND METHODS' section clearly and accurately describes all materials and methods used to obtain the data presented in the article and is adequate for a reader to repeat the study.	[N]
17	The 'RESULTS' section concisely describes the observational and experimental results. Representative data and data that have scientific significance are emphasized. Data is presented in either the text, a table or figure ( <i>i.e.</i> , chart, diagram, graph or image), but is not repeated among each. Information presented in the tables and figures clearly describes the trends, meaning, and inferences. Results described in textual form are accurate, concise and clear.	[N]
18	Statistical symbols are accurate. Statistical significance is expressed as ${}^{a}P$ < 0.05, ${}^{b}P$ < 0.01 ( $P$ > 0.05 usually does not need to be denoted).	[N]



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	If there are other series of $P$ values, $^{c}P < 0.05$ and $^{d}P < 0.01$ are used,	
	and a third series of $P$ values is expressed as $^{\rm e}P$ < 0.05 and $^{\rm f}P$ < 0.01.	
	Statistical data is expressed as mean ± SD or mean ± SE.	
	The 'DISCUSSION' section (1) describes the main purpose and	
	hypothesis of the study; (2) summarizes the most important results;	
	(3) illustrates and explains the results (but does not simply repeat	
19	the data) and draws conclusions or inferences based on the results;	[NI]
19	(4) points out the limitations of the study and their impact on the	[N]
	results, as well as proposes further advice on future research	
	topic(s) or direction(s); and (5) describes the theoretical significance	
	and practical value of the findings.	
	The 'ACKNOWLEDGEMENTS' section expresses gratitude to any	
	individuals or organizations for technical support (i.e., providing	
20	instrumentation, equipment or experimental materials, and/or	[Y]
20	assistance in experimental work), non-technical services (i.e., useful	
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
24	The 'ARTICLE HIGHLIGHTS' section provides comments for	
21	original articles in accordance with the specified format.	[N]
	The 'REFERENCES' section lists the references in the Vancouver	
	style. This style uses Arabic numeral in-text citations based on the	
	order of the first appearance of a source in the text. For citations	
22	where the author's name is indicated in the text, a superscript	[Y]
	number should be placed following the name (i.e, "Pang et al"). For	
	citations where no author is indicated, a superscript number should	
	be placed at the end of the sentence. Respective examples are: "Ma <sup>[1]</sup>	
	reported", "Pan et al <sup>[2-5]</sup> indicated"; "PCR has a high	
	sensitivity <sup>[6,9]</sup> ." No superscript numbers are used when the	
	reference number is described in the text; for example, "The	
	experimental method used has been described in reference [8]." The	



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	style of reference citations in tables is the same as that in the text (e.g., Pan et $al^{[2-5]}$ , please see reference [8]).	
	Journal references have been verified to ensure that there are no	
	duplicate references and that the PMID numbers are correct. For	
	references not yet included in PubMed: the name of Chinese	
23	journals is spelled out using Chinese Pinyin, with the first letter of	[Y]
	each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of	
	journals in other languages are listed according to indexing	
	information retrieved from Google. Book references are presented	
	with all the information relevant to the electronic version.	
	The number of cited references is appropriate for the article type, as	
	follows:	
24	Commentary: no less than 50;	[Y]
	Review: no less than 100;	
	Article: no less than 30/26;	
	Case Report and Letter to the Editor: no less than 1.	
	The ethics-related statements are provided in accordance with the	
25	manuscript type (e.g., Manuscript NoInstitutional review board	[N]
	statement, Manuscript NoAnimal care and use statement, etc.).	
	The names of the peer reviewers and the scientific editor are present	
26	at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang	[Y]
	JL).	



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The order and numerical labeling of tables and figures is consistent with their appearance and presentation in the text. Symbols in tables (e.g., +, -, ×, *) correctly correspond to the definitions in the footnotes. Only one legend is provided for each multi-panel figure consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. A:; B:; C:; D:; E:; F:  Split pictures include flow charts, line graphs, histograms, and graphs including text. Unsplit pictures include meta-analysis diagrams, PCR amplification curves, and survival curves.  The author(s) highlighted the changes made to the manuscript according to the peer-reviewers' comments.  The responses to the peer-reviewers' comments are consistent with the changes made to the manuscript.  The revised manuscript is provided (file name: Manuscript NoReview; e.g., 870-Review).  The letter of peer-reviewers' comments is provided (file name: Manuscript NoAnswering reviewers; e.g., 870-Answering reviewers).  The related ethics and relevant documents are provided, such as (1) Approved grant application form(s) or funding agency copy of any approval document(s) (file name: Manuscript NoGrant application form(s)); (2) Biostatistics review certificate (file name: Manuscript NoBiostatistics statement); (3) Conflict-of-interest statement (file name: Manuscript NoConflict statement); (3) Conflict-of-interest statement (file name: Manuscript NoClinical trial registration statement (file name: Manuscript NoClinical trial registration statement); (5) Institutional review board approval form or document (file name: Manuscript NoInstitutional review board			
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consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. A:; B:; C:; D:; F:  Split pictures include flow charts, line graphs, histograms, and graphs including text. Unsplit pictures include meta-analysis diagrams, PCR amplification curves, and survival curves.  The author(s) highlighted the changes made to the manuscript according to the peer-reviewers' comments.  The responses to the peer-reviewers' comments are consistent with the changes made to the manuscript.  The revised manuscript is provided (file name: Manuscript NoReview; e.g., 870-Review).  The letter of peer-reviewers' comments is provided (file name: Manuscript NoAnswering reviewers; e.g., 870-Answering reviewers).  The related ethics and relevant documents are provided, such as (1) Approved grant application form(s) or funding agency copy of any approval document(s) (file name: Manuscript NoGrant application form(s)); (2) Biostatistics review certificate (file name: Manuscript NoBiostatistics statement); (3) Conflict-of-interest statement (file name: Manuscript NoClinical trial registration statement (file name: Manuscript NoClinical trial registration statement); (5) Institutional review board approval form		tables (e.g., +, -, $\times$ , $\div$ , *) correctly correspond to the definitions in the	
consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. A:; B:; C:; D:; E:; F:  Split pictures include flow charts, line graphs, histograms, and graphs including text. Unsplit pictures include meta-analysis diagrams, PCR amplification curves, and survival curves.  29 The author(s) highlighted the changes made to the manuscript according to the peer-reviewers' comments.  The responses to the peer-reviewers' comments are consistent with the changes made to the manuscript.  The revised manuscript is provided (file name: Manuscript NoReview; e.g., 870- Review).  The letter of peer-reviewers' comments is provided (file name: Manuscript NoAnswering reviewers; e.g., 870-Answering reviewers).  The related ethics and relevant documents are provided, such as (1) Approved grant application form(s) or funding agency copy of any approval document(s) (file name: Manuscript NoGrant application form(s)); (2) Biostatistics review certificate (file name: Manuscript NoBiostatistics statement); (3) Conflict-of-interest statement (file name: Manuscript NoClinical trial registration statement (file name: Manuscript NoClinical trial registration statement); (5) Institutional review board approval form	27	footnotes. Only one legend is provided for each multi-panel figure	[NI]
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according to the peer-reviewers' comments.  The responses to the peer-reviewers' comments are consistent with the changes made to the manuscript.  The revised manuscript is provided (file name: Manuscript NoReview; e.g., 870- Review).  The letter of peer-reviewers' comments is provided (file name: Manuscript NoPeer-review(s); e.g., 870-Peer-review(s)).  The response letter is provided (file name: Manuscript NoAnswering reviewers; e.g., 870-Answering reviewers).  The related ethics and relevant documents are provided, such as (1) Approved grant application form(s) or funding agency copy of any approval document(s) (file name: Manuscript NoGrant application form(s)); (2) Biostatistics review certificate (file name: Manuscript NoBiostatistics statement); (3) Conflict-of-interest statement (file name: Manuscript NoConflict-of-interest statement); (4) Clinical trial registration statement (file name: Manuscript NoClinical trial registration statement); (5) Institutional review board approval form		diagrams, PCR amplification curves, and survival curves.	
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