

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 71347

Title: Endoscopic Submucosal Dissection for early signet ring cell gastric cancer: A

Systematic Review and Meta-Analysis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05911820

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-09-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-12 00:39

Reviewer performed review: 2021-09-13 22:45

Review time: 1 Day and 22 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	 [] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[]Yes [Y]No



Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

General: The authors present a systematic review and meta-analysis about Endoscopic submucosal dissection (ESD) for early signet ring cell cancer (SRC). The authors selected seven studies. The contents and results of these papers are quite different, and it is difficult to examine just them. I think the point of view is good, however, there are several issues in this paper. Comments: 1 The authors described '5 studies in South Korea and 2 study in Japan'. It looks like 6 studies in South Korea and 1 study in Japan. (2 study \rightarrow 2 studies) 2 The authors described '5 English and 2 Korean study were selected.' It looks like 6 English studies were selected. (2 Korean study \rightarrow 2 Korean studies) 3 Why did this paper exclude the result of Horiuchi's study in Figure 4? Horiuchi's study shows the data of complete curative resection rate 93.8%, Incomplete resection rate 0% and En bloc resection rate 100%. This data reflects the recent SRC ESD outcomes at high-quality facilities well. If the data cannot be used due to statistical reasons or exclusion, the reliability of this paper will be reduced. Please explain and consider.



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Reviewer's code: 05194798

Position: Editorial Board

Academic degree: MD

Professional title: Director

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-09-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-14 09:02

Reviewer performed review: 2021-09-15 10:01

Review time: 1 Day

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	 [] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript was a review article which focused on the feasibility of ESD for early signet ring cell gastric cancer. This study was conducted well, and the methods are appropriate. The data are presented clearly. This topic will be of interest to clinicians and researchers in the field. However, the following major and minor issues require clarification: Major 1. I can't agree with the conclusion that ESD is a technically feasible modality for SRC EGC as the lateral margin invasion was highly detected after ESD. Please reconsider the conclusion. 2. As the authors mentioned in the discussion section, the included studies have too much heterogeneity to discuss the feasibility of ESD for early signet ring cell gastric cancer. What we are interested in is whether the indication of ESD for early signet ring cell gastric cancer can be expanded same as that for differentiated-type early gastric cancer. I recommend that the authors provide some data and suggestions regarding the indication from this point of view if possible. Minor 1. (P6L6) Please provide unabbreviated words of 'ES'. 2. The third problem of ESD for SRCs ultimately sounds same as the first one. 3. (Figure 1) The second block (Record removed) in the flowchart may bring confusion.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Manuscript NO: 71347

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05194798

Position: Editorial Board

Academic degree: MD

Professional title: Director

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

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Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2021-11-16 09:17

Reviewer performed review: 2021-11-17 06:24

Review time: 21 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I felt like the author's addressed most of my concerns with the manuscript and it ended up significantly improving the quality of the article. Here is a suggestion for 1. (Figure 1) The second block in the flowchart still looks confusing. improvement: Please make a modification.