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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 77717

Title: Disseminated carcinomatosis of the bone marrow caused by granulocyte

colony-stimulating factor: A case report and review of literature

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03017840 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2022-05-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-23 08:15

Reviewer performed review: 2022-05-24 02:39

Review time: 18 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish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	[Y]Yes []No



Baishideng **Publishing**

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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

In this study the authors introduced a case report with disseminated carcinomatosis of the bone marrow from early gastric cancer, which appeared to be interesting. However, there are some specific points needed to be carefully considered. 1.The authors suggested that recurrence presenting as DCBM was caused by the potential of G-CSF administration, while the only envidence was a diffuse positive staining for the G-CSF receptor (G-CSFR) in the relapsed gastric cancer cell cytoplasm of the autopsied bone marrow and negative staining for G-CSFR of primary lesion cancer cells. The causal relation is too weak and more envidences need to be added . 2. Methotrexate, fluorouracil and calcium folinate were prepormed as first-line palliative chemothrapy regimen after diagnosis, however methotrexate was not the standard treatment as first-line therapy. The authors need to explain that.



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Reviewer's code: 03739881 Position: Peer Reviewer Academic degree: Doctor

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2022-05-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-21 04:48

Reviewer performed review: 2022-05-25 07:01

Review time: 4 Days and 2 Hours

Scientific quality	[Y] Grade A: Excellent [] 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	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] 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 case report describes A 55-year-old Japanese woman diagnosed as disseminated carcinomatosis of the bone marrow (DCBM) who cured from early gastric cancer caused by granulocyte colony-stimulating factor. In this case report G-CSFR staining was negative in the primary lesion but was diffusely positive in the relapsed lesion. G-CSF can promote the growth of solid tumors not only through G-CSFR on tumor cells but also by modulating immune cell activities or bone remodeling. So that G-CSF administration should be performed carefully in patients who have a preceding cancer. This case report state a rare case about G-CSF could induce cancer recurrence even after curative treatment. It should be watchful for clinicians.



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Reviewer's code: 05842368 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2022-05-21

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-06-07 05:51

Reviewer performed review: 2022-06-20 06:55

Review time: 13 Days and 1 Hour

Scientific quality	[Y] Grade A: Excellent [] 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	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

This case report described a patient who suffered from disseminated bone marrow carcinomatosis that originated from a cured early gastric adenocarcinoma 8 years ago after a recent multiple G-CSF administrations for netropenia induced by postoperative radiotherapy and chemotherapy for a second primary Ewing sarcoma diagnosed six years after gastrectomy. The case per se is very meaningful and a good reminder for clinical doctors. Leukopenia and neutropenia is very common during chemotherapy, so when doctors prescribe this drug in the future, should be more cautious, especially in gastric cancer. Additionally, G-CSF/ G-CSFR may need to be stained for risk predicting. Besides, the narrative is clear and smooth, and the discussion is reasonable.