

PEER-REVIEW REPORT

Name of journal: *World Journal of Meta-Analysis*

Manuscript NO: 81135

Title: Cancer risk stratification system and classification of gastritis: perspectives

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03713703

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Senior Lecturer, Staff Physician

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: Russia

Manuscript submission date: 2022-10-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-28 01:53

Reviewer performed review: 2022-11-07 04:21

Review time: 10 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" 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 Grade E: Do not publish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 type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

This is an overview of gastritis and gastric cancer risk stratification. However, there are several important points that are not addressed: 1. The highest risk of gastric cancer in patients with chronic gastritis is in patients with gastric dysplasia (especially high-grade dysplasia) and intestinal metaplasia (especially widespread intestinal metaplasia and incomplete intestinal metaplasia subtype). These high-risk features of chronic gastritis were not addressed in this review. 2. Atrophic gastritis was mentioned in the manuscript but not convincing. The risk level of gastric cancer in patients with gastritis depends not only on the severity but also the extent of mucosal atrophy. The OLGA classification has been shown to be much better at assessing the risk of progression to gastric cancer compared to the updated Sydney classification. However, it is poorly discussed. 3. The authors propose “for gastric cancer prevention at the level of large populations, we suggest using computer programs”. However, the current evidence is not robust enough for such suggestion. Further population-based studies are required.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00504218

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Russia

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Reviewer accepted review: 2022-11-08 01:23

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Review time: 4 Days and 5 Hours

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
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statements

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

SPECIFIC COMMENTS TO AUTHORS

In this review article, authors assessed a unique cancer risk stratification system and classification of gastritis. This is a well-written paper containing interesting perspectives which may merit publication. For the benefit of the reader, however, a number of points need clarifying and certain statements require further justification. These are given below. 1. Personal information should be removed even in expression with domestic language. 2. '*Helicobacter pylori*' or related words should be expressed in Italic font.