

## PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 81348

Title: Can visceral fat parameters on computed tomography be used to predict occult

peritoneal metastasis in gastric cancer?

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00183481

**Position:** Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-11-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-25 10:28

Reviewer performed review: 2022-11-29 12:24

**Review time:** 4 Days and 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



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

#### SPECIFIC COMMENTS TO AUTHORS

The authors determined usefulness of visceral fat (VF) parameters from computed tomography (CT) to predict occult peritoneal metastasis in the patients with gastric cancer. The workstation was used to measure of parameters of VF and subcutaneous fat from CT images. The mean attenuation was higher in the patient with peritoneal metastasis (PM). The AUC of the VF in the regions of interest to predict PM was 0.657. The authors concluded this study demonstrated the great potential of VF parameters to predict occult PM in gastric cancer patients. The Most important finding in this study is reproducible results in the measurement of VF parameters. There is a notable limitation in this study. The p value of mean attenuations of VF was statistical but not remarkable (p = 0.048) in the multiple regression logistic analysis. Conversely, mild ascites and cT stage were useful to predict PM (p = 0.012, 0.024) in Table 5. The AUC of VFROI2 was 0.657 in the manuscript, and 0.652 in the abstract. The value was not satisfactory enough in clinical use. Please show the sensitivity and specificity in the AUC curve. Small points

Please check the OR in Table 5. The OR in cT stage ( $\geq$ T4 vs  $\leq$ T3) was 0.376, which is less than 1.0. Is it correct? The OR in intercept was 1085.396 in Table 5. Is it correct?



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Peer-review model: Single blind

Reviewer's code: 05759436

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-11-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-12-09 13:29

Reviewer performed review: 2022-12-09 14:12

Review time: 1 Hour

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



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

### SPECIFIC COMMENTS TO AUTHORS

This study developed an individualized model that combined mean attenuation of VF and clinical factors for predicting occult PM in patients with gastric carcinoma, and demonstrates the potential of VF parameters in predicting occult PM in GC.



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Reviewer's code: 05251368

**Position:** Peer Reviewer

Academic degree: DNB, FACS, MBBS, MD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-11-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-12-09 21:58

Reviewer performed review: 2022-12-11 12:28

Review time: 1 Day and 14 Hours

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

### SPECIFIC COMMENTS TO AUTHORS

The utility of the study really needs to be adressed or validated. Does this study adds more or helps in change in the way we approach Management of Gastric cancer is what needs to be looked into.



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**Reviewer's code:** 03475120

**Position:** Editorial Board

Academic degree: FACS, MD, PhD

Professional title: Chief Doctor, Director, Doctor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-11-04

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-12-10 00:21

Reviewer performed review: 2022-12-16 03:47

Review time: 6 Days and 3 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
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### SPECIFIC COMMENTS TO AUTHORS

Though sample size was small, this paper is well written.