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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 85581

Title: Diagnostic value of conventional endoscopic ultrasound for lymph node metastasis in upper gastrointestinal neoplasia: A meta-analysis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03262644

Position: Peer Reviewer

Academic degree: FEBG, MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Croatia

Author's Country/Territory: China

Manuscript submission date: 2023-05-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-06-17 18:23

Reviewer performed review: 2023-06-22 17:40

Review time: 4 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is well prepared manuscript, using adequate statistical methodology. I would only suggest the authors to point-out throughout the manuscript, starting with the title, that this meta-analysis refers to the ordinary EUS, i.e. analysis by using grey -scale imaging, and not auxiliary methods such as Elastography, FNA or CEUS. This is mentioned in discussion, but should be clear from the title.



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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03025501

Position: Peer Reviewer

Academic degree: PhD

Professional title: Head

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2023-05-05

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-23 04:46

Reviewer performed review: 2023-07-02 21:56

Review time: 9 Days and 17 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Dear author, I have read with great interest the paper by Chen et al. The article is a meta-analysis on a controversial topic such as EUS accuracy in the staging of esophago-gastric tumors. In my view, the review of the literature is exhaustive and the methodology is adequate for the study purpose. However, I have some concerns about the paper: Major: 1. Heterogeneity of the population: The paper includes a wide timespan, with different technologies and tools, such as EUS miniprobes. This fact includes a significant source of bias. 2. Neoadjuvant therapy. I'm not sure that all papers include patients naïve to neoadjuvant therapy. i.e: ref 27, 29, 31, 39). I think authors should reassure this fact, and exclude papers with patients receiving NT. Nevertheless, this exclusion criteria determines a selection bias, favoring the inclusion of patients with lower tumoral staging. Indeed, patients in this study were N positive and did not receive the optimal treatment. This must be extensively explained and discussed in the paper. Minor: 1. Some English expressions in the introduction are incorrect. Please revise. 2. When explaining upper GI neoplasms, authors state that they all are similar in management. This might be true for adenocarcinomas, but is clearly false for epidermoid



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cancers. 3. Some statements about the role of FNA should be included in the introduction.



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Title: Diagnostic value of conventional endoscopic ultrasound for lymph node metastasis in upper gastrointestinal neoplasia: A meta-analysis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02978155

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor, Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2023-05-05

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-26 03:26

Reviewer performed review: 2023-07-03 15:48

Review time: 7 Days and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Overall, the study provides some insights into the diagnostic value of EUS for LNM in upper gastrointestinal neoplasia. It is well-written. Only few comments: 1. Inclusion criteria: The study provides clear and specific inclusion criteria, which is important for ensuring the selection of relevant and appropriate studies. However, it is unclear whether the exclusion criteria were pre-specified or developed during the study selection process. Pre-specifying exclusion criteria would have enhanced the transparency and reproducibility of the study. 2. Study selection process: The study describes the process of study selection in detail, including the use of EndNote software and the involvement of two independent researchers. However, it does not mention whether inter-rater agreement was assessed during the study selection process. Reporting on the inter-rater agreement would have provided additional information on the reliability of the study selection. 3. Statistical analysis: The study provides detailed information on the statistical methods used, including sensitivity analysis, assessment of heterogeneity, and publication bias analysis. However, it does not provide an explanation for the choice of the bivariable mixed effects model for data evaluation and



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picture generation. Justifying the use of this particular statistical approach would have strengthened the methodological rigor of the study. 4. In the study, the role of elastography was not considered. Elastography is an imaging technique that assesses tissue stiffness and can potentially enhance the diagnostic accuracy of EUS in detecting lymph node metastasis. While the study does not provide data on elastography or its impact on the results, it is important to acknowledge this limitation and discuss its potential implications in the study's findings. Furthermore, in the discussion section, it would be valuable to mention the potential benefits of incorporating elastography into EUS examinations. Overall, the study provides a comprehensive analysis of the diagnostic value of EUS for LNM in upper gastrointestinal neoplasia.