

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 85686

**Title:** Systemic treatments for resectable carcinoma of the esophagus

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03656608

**Position:** Peer Reviewer

**Academic degree:** 博士, MD, PhD

**Professional title:** 教授, Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Thailand

**Manuscript submission date:** 2023-05-10

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-06-11 02:27

**Reviewer performed review:** 2023-06-19 10:09

**Review time:** 8 Days and 7 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 Grade E: Do not publish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
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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 paper reviews current evidence about the systemic treatments for resectable carcinoma of the esophagus. This paper has some significance for clinicians and researchers working. However, it has some major issues: 1.This mini review paper is by far too long, it should be significantly shortened. Do not review the subject extensively. 2.The authors should produce 2-3 figures and tables and so that paper is easier to read and data can be presented in a compact manner. 3.The author might need to add more information about the mechanisms of immune checkpoint inhibitors for resectable esophageal cancer treatment.

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**Peer-review model:** Single blind

**Reviewer's code:** 02856239

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** Thailand

**Manuscript submission date:** 2023-05-10

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-06-20 09:08

**Reviewer performed review:** 2023-06-20 13:48

**Review time:** 4 Hours

Scientific quality	<input checked="" 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 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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<b>Scientific significance of the conclusion in this manuscript</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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

The authors wrote a quite interesting review on esophageal cancer and treatment. This is generally of high interest. There are big research gaps. Foods and other factors are known to influence the gut microbiome, which in turn affect tumorigenesis. At least, they should discuss interactions if foods are not main themes. There is a widely open opportunity that is currently missed. These facts should be discussed. The authors should discuss gaps and opportunities such as research on dietary / lifestyle factors including alcohol, smoking, medications, microbiome, and personalized molecular biomarkers, which is needed for further research. The authors should discuss molecular pathological epidemiology research that can investigate diet, microbiota, immune and other factors in relation to molecular pathologies and clinical outcomes. Molecular pathological epidemiology research can be a promising direction (eg, Annu Rev Pathol 2019; Gut 2022; etc.) and should be discussed in this paper.

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**Peer-review model:** Single blind

**Reviewer's code:** 05382317

**Position:** Peer Reviewer

**Academic degree:** FRCS (Hon), MD

**Professional title:** Doctor, Surgeon

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Thailand

**Manuscript submission date:** 2023-05-10

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-06-23 00:16

**Reviewer performed review:** 2023-06-25 07:48

**Review time:** 2 Days and 7 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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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

As immunotherapy has achieved significant efficacy and acceptable toxicity in both first-line and second-line treatment of advanced EC, neoadjuvant immunotherapy has become a research hotspot in resectable locally advanced EC currently. In this paper, the latest research progress and some limitations of neoadjuvant immunotherapy in locally advanced resectable EC were reviewed. The feasibility, safety and efficacy of neoadjuvant immunotherapy still need to be further verified by large randomized clinical studies.