

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Oncology*

Manuscript NO: 87247

Title: Effect of screening colonoscopy frequency on colorectal cancer mortality in patients with a family history of rectal cancer

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 07746927

Position: Peer Reviewer

Academic degree: PhD

Professional title: Doctor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2023-10-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-10-26 00:45

Reviewer performed review: 2023-11-07 09:09

Review time: 12 Days and 8 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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

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 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 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 study found that in elderly patients with colorectal cancer, laparoscopic colectomy had better short-term outcomes than open colectomy, and laparoscopic colectomy had superior long-term survival outcomes compared with open colectomy. These results provide a scientific basis for the early treatment of tumors in the relatives of patients with hereditary colorectal cancer and for the systematic management of families with hereditary colorectal cancer. This study has great clinical value as a reference for the treatment and prevention of malignant tumors of the gastrointestinal tract. However, there are some issues to be address to improve the manuscript. 1) The statistical method used for each result should be indicated. 2) the Abstract is not good enough and needs to be revised. Need to add some simple background and be more organized. 3) There are some grammar errors in this manuscript that need to be corrected.

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Title: Effect of screening colonoscopy frequency on colorectal cancer mortality in patients with a family history of rectal cancer

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06540812

Position: Peer Reviewer

Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2023-10-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-10-27 09:16

Reviewer performed review: 2023-11-07 10:07

Review time: 11 Days

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 type="checkbox"/> Grade B: Good <input checked="" 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

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 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 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 author compared the clinical, pathological, and follow-up data of colorectal cancer patients who underwent laparoscopic colectomy or open colectomy. With clinicopathological and follow-up data of 104 patients, they found that, in elderly patients with colorectal cancer, laparoscopic colectomy had better short-term outcomes than open colectomy, and laparoscopic colectomy had superior long-term survival outcomes compared with open colectomy. This study was developed effective measures for the prevention, control, and treatment of colorectal cancer. It is well written and highly interesting. The study is well designed and presented with detailed and extensive discussion. Thank you for giving opportunity to review this study. However, the following points must be considered before publication. In my opinion, the description of methods and results is too simple, and it would be better to be more detailed.