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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 87419

Title: Machine Learning Identifies the Risk of Complications after Laparoscopic Radical

Gastrectomy for Gastric Cancer

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03731081 Position: Peer Reviewer Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2023-08-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-08-30 19:36

Reviewer performed review: 2023-09-03 10:06

Review time: 3 Days and 14 Hours

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors used three methods of mathematical prediction of the results of minimally invasive laparoscopic surgical methods for the treatment of gastric cancer: Lasso regression model construction, Random forest model construction and Artificial neural networks model construction. These predictive methods have confirmed the effectiveness of laparoscopic surgery for the treatment of gastric cancer. It is laparoscopic distal gastrectomy (LDG) and laparoscopic total gastrectomy (LTG). This study is of great practical importance for the treatment of elderly and old age patients with gastric cancer. It is these patients who need effective minimally invasive surgery. The manuscript is recommended for publication in the World Journal of Gastroenterology.



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Reviewer's code: 06082695 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2023-08-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-09-19 07:33

Reviewer performed review: 2023-09-20 13:17

Review time: 1 Day and 5 Hours

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
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Conclusion	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Radical gastrectomy is the first choice of treatment for gastric cancer, but the occurrence of postoperative complications is an important adverse factor affecting the prognosis of patients with gastric cancer. In this study, the authors included clinical data from multiple centers for research. The authors used lasso regression, random forest and artificial neural network to construct postoperative complications prediction models for laparoscopic distal gastrectomy (LDG) and laparoscopic total gastrectomy (LTG), and evaluated the prediction efficiency and accuracy. The constructed random forest model can better predict severe complications in patients undergoing laparoscopic radical gastrectomy. Some comments: 1. The results of this article are of great value in guiding clinical treatment. It is recommended that the author add content related to clinical usage methods to facilitate practical application by clinicians. 2. Text descriptions should be revised carefully. For example: the last line of Abstract, Conclusions: "and and".