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PEER-REVIEW REPORT

Name of journal: *World Journal of Experimental Medicine*

Manuscript NO: 89319

Title: Predictors of disease recurrence after radical resection and adjuvant chemotherapy in patients with stage IIb-IIIa squamous cell lung cancer: A retrospective analysis

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03093768

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor, Chief Doctor, Doctor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: China

Author's Country/Territory: Russia

Manuscript submission date: 2023-10-27

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-22 14:17

Reviewer performed review: 2023-12-02 13:42

Review time: 9 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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 type="checkbox"/> Grade B: Good <input checked="" 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 type="checkbox"/> Grade B: Good <input checked="" 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

The authors concluded that there are four independent factors that can predict disease recurrence, including a low degree of tumor differentiation, metastases in regional lymph nodes, presence of loss, and fine fiber connective tissue in tumor stroma and fragmentation in tumor solid component, based on an analysis of follow-up and pathological phenomenon of 70 patients with lung squamous cell carcinoma who underwent radical surgery and postoperative adjuvant chemotherapy. Major comment. Some issues should be responded positively. 1.As the patients were staged from Ib to IIIa, the detailed data about TNM staging should be presented in the table. The TNM staging could not be replaced by T stage nor N stage. Was there any relationship between the pathological characteristics and TNM staging? It is obviously that recurrence of LC is correlated with TNM staging and thoroughness of surgery. so, the TNM staging and type of resection should be described in details. 2.As the patients



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were LSCC, a great number of them were suffered of central location cancer. This indicated something to thoracic surgeons that sleeve lobectomy were needed frequently. And we were told that only 24 patients aged under 60 and 46 patients aged above 60. However, pneumonectomy was performed in 40 patients. That surgical method was risky for those older patients. One more thing should be concerned is that a lobectomy without sleeve resection for central lung cancer is a risk of positive margin of bronchus. Did Video assisted thoracic surgery involve in these patients? 3.The chemotherapy should be written in details. Minor comment. In the section of introduction, LSCC should be used to replace LC When lung squamous cell carcinoma enters the topic.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Experimental Medicine*

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Professional title: Associate Professor, Chief Doctor, Doctor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: China

Author's Country/Territory: Russia

Manuscript submission date: 2023-10-27

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2023-12-21 14:10

Reviewer performed review: 2023-12-23 10:05

Review time: 1 Day and 19 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
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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection



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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
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SPECIFIC COMMENTS TO AUTHORS

Given that the clinical data comes from the period of 2009-2018, the definition of uncertain resection had received less attention from clinical doctors at that time, and the data presented in this article is accpetable. In future data on lung cancer surgery, in addition to R0 and R1, R (un) is also a situation that needs to be considered.