

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Oncology*

**Manuscript NO:** 89428

**Title:** Safety and efficacy of a programmed cell death 1 inhibitor combined with oxaliplatin plus S-1 in patients with Borrmann large type III and IV gastric cancers

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03270609

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2023-10-31

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-10-31 11:02

**Reviewer performed review:** 2023-11-05 20:32

**Review time:** 5 Days and 9 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 Grade E: Do not publish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

<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 checked="" type="checkbox"/> Minor revision <input 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

Review to the manuscript No. 89428 "Safety and effectiveness of a PD-1 inhibitor combined with oxaliplatin plus S-1 in patients with Borrmann large type III and IV gastric cancers" Unfortunately, late diagnosis of gastric cancer remains a serious problem in oncology. Patients with locally advanced GC require neoadjuvant chemotherapy, the effectiveness of which determines the prognosis of the disease. Unfortunately, existing neoadjuvant chemotherapy regimens for gastric cancer are often not effective enough. In this regard, the search for new treatment regimens may help improve long-term results of treatment of this pathology. The authors note the advisability of including immune checkpoint inhibitors in standard neoadjuvant treatment regimens for patients with gastric cancer and substantiate the key predictors of response to this treatment. The results obtained are interesting from a clinical point of view. However, there are a number of issues and comments that the authors need to pay attention to. Abstract Give the correct definition of the abbreviation "TRG", namely, "tumor regression grade" Introduction 1. Page 4, line 3. Duplication of the expression "...chromosomal instability (CIN), and chromosomal instability (CIN)[9]." 2. Define the

abbreviations TCGA, MSS and ORR. Materials and methods Evaluation of the Treatment Effect It is advisable to provide specific criteria for assessing the effectiveness of neoadjuvant chemotherapy, which were followed by radiologists. In addition, the results obtained should be reflected in the appropriate section. Or authors must exclude assessment of the effectiveness of neoadjuvant chemotherapy using radiation methods. Results Given that the authors compare the frequency of ypN0 in the group of patients receiving P-SOX and SOX, it is advisable to provide cN0 values before treatment in these groups. 3.1. Clinical Characteristics Sentence: "At the time of the initial diagnosis, there was a statistically significant difference in CA125 (32.14% vs 14.75%,  $p = 0.034$ )."

It is unclear from this sentence which group had higher CA125 levels. Discussion. Define the abbreviation "CPS" Tables The title "Demographic data..." is probably not the best title Supplement Table 2. Please note that for the PD-L1 marker you give  $RR = 1.356$  and 95%  $CI = 0.090-0.740$ . It is incorrect. Either the RR must be less than 1 or both 95% CI values must be greater than one. There are quite a lot of stylistic errors and incorrect expressions in the manuscript. The manuscript requires language correction. In addition, it is advisable for authors to adhere to generally accepted terminology, for example, to use in the text the phrase "lymphovascular invasion" and not "vascular tumor thrombus"

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**Peer-review model:** Single blind

**Reviewer's code:** 06303455

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Associate Research Scientist, Research Assistant, Research Associate

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

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

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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

<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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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

In reference to the manuscript entitled "Safety and effectiveness of a PD-1 inhibitor combined with oxaliplatin plus S-1 in patients with Borrmann large type III and IV gastric cancers", this retrospective study is interesting and novel as it aims to compare two patient populations with Borrmann large type III or IV gastric cancers treated with oxaliplatin + S-1 with or without an unknown PD-1 inhibitor! The manuscript is of interest; however, minor and major issues must be addressed before any further consideration! Please revise in a point-by-point manner with the track changes so that the changes are visible to the reviewers! Please specify the PD-1 inhibitor in the abstract section. There are numerous typos and errors in the text which requires that it undergo a substantial English revision preferentially by a native speaker colleague experienced in this field or by a language-editing service provider. Some tenses must also be revised. One of the major gaps of this study is that there is no data of the assessment of the expression level of PD-1 or PD-L1? How do you think this might have affected the findings presented herein? At the end of the introduction section, the nature of the PD-1 inhibitor is not elucidated yet. Please revise! The clinical trial registry number must be



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included both in abstract and main text alongside references to the original article(s). What is even this PD-1 mAb? Where is there no info of it? Are there more than one PD-1 inhibitor? Please specify all grading schemes with reference! Instead of using words such as discernible for reporting statistically significant difference, the authors must use "significant" throughout the text. There must be substantial revisions in the text wherever results are reported with statistical analysis. In section 3.6, results are compared based on the variates before and after treatment, rather than between the two study groups. However, the authors conclude that P-SOX is safer. How does this work? In the discussion section, please go deeper and give reader some details (in terms of CR, PD, SD, ORR, etc.) While discussing clinical findings! What do you this is or might be the underlying mechanism for less postoperative adverse events in the group that also underwent immunotherapy? is there a study that has investigated this?

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** *World Journal of Gastrointestinal Oncology*

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**Reviewer's code:** 06303455

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Associate Research Scientist, Research Assistant, Research Associate

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

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

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**Reviewer chosen by:** Jing-Jie Wang

**Reviewer accepted review:** 2024-01-12 05:39

**Reviewer performed review:** 2024-01-12 06:12

**Review time:** 1 Hour

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
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
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

## **SPECIFIC COMMENTS TO AUTHORS**

Special thanks to the authors for addressing the raised concerns as much as possible!