



The University of Oklahoma  
Health Sciences Center  
Department of Internal Medicine  
Section of Digestive Diseases and Nutrition

May 8, 2014

Memorandum

To: Wasaburo Koizumi, MD, PhD, Hsin-Chen Lee, PhD, Dimitrios Roukos, MD, PhD  
Editors-in-Chief, World Journal of Gastrointestinal Oncology

From: Kenneth Vega, MD, Professor of Medicine, Division of Digestive Diseases and  
Nutrition

Below are point-by point responses to each reviewer's comments. Our responses are in *italic* and in **bold** within the revised manuscript.

Comments to the Author:

Reviewer #1: I have no further comments on this well written manuscript.  
*We appreciate the reviewer's comment.*

Reviewer #2: The manuscript is well designed, written and presented.  
*We appreciate the reviewer's comment.*

Reviewer #3: After my evaluation I believe that this paper should be rejected mainly because it does not bring nothing new, gastroenteropancreatic tumours are not rare, in fact they are the most common small bowel tumor and appendiceal tumor. Also, this paper has a lot of imprecisions, namely: -The currently correct definition is gastroenteropancreatic neuroendocrine tumours. -In the abstract "Gastrointestinal NET occur within the stomach, small intestine, liver, and rectum" and also in the appendix and large bowel. I have a lot of questions concerning diagnosis, staging and follow up of the patients: why are so few patients with a Somatostatin receptor scintigraphy (in 11 patients only patient 7), this is a very important exam included in all the guidelines.

*We appreciate the reviewer's comments. This review includes neuroendocrine tumors of the gastrointestinal tract. Pancreatic neuroendocrine tumors are diagnosed in 1,000 Americans per year and are considered separately like neuroendocrine tumors of the bronchus. The diagnosis of neuroendocrine tumors in our series was confirmed pathologically by appropriate stains. All patients with benign neuroendocrine tumors underwent repeat endoscopy in one year and had no symptoms suggestive of malignancy. In a perfect world, all patients should undergo octreotide scanning.*

Thank you again for considering our manuscript for publication in the World Journal of Gastrointestinal Oncology.