

ESPS Peer-review Report
Name of Journal: World Journal of Hematology

ESPS Manuscript NO: 8017

Title: Age may be an independent adverse prognostic factor for overall survival in acute myeloid leukemia

Reviewer code: 00069481

Science editor: Xiu-Xia Song

Date sent for review: 2013-12-11 19:05

Date reviewed: 2014-03-04 14:04

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The authors estimated the age as an independent adverse prognostic factor for OS in AML through multivariate analysis. The statistical study might provide us new sight in diagnosis of AML. However, the authors didn't attach the tables and figures in this manuscript. It is difficult to estimate the reliability of this manuscript without these data. Furthermore, since the population-based studies are restricted in Japanese patients, and prognostic factors may differ among races, there should be an additional "in Japan" in the title. Minor concern: the decimal point presents in the manuscript should be ".", not "?". For example, it should be "21.1%", not "21?1%".

ESPS Peer-review Report
Name of Journal: World Journal of Hematology

ESPS Manuscript NO: 8017

Title: Age may be an independent adverse prognostic factor for overall survival in acute myeloid leukemia

Reviewer code: 02097364

Science editor: Xiu-Xia Song

Date sent for review: 2013-12-11 19:05

Date reviewed: 2014-03-05 13:58

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Ohnishi H et al. reported for the first time that older age is an independent adverse prognostic factor for overall survival in AML patients through a population-based study cohorting 213 adult AML patients, by using multivariate analysis. Although the results of this study are not very surprising, the authors presented the clear data and discussed the results reasonably. They also clarified some limitations in this study in the discussion section. Overall, the manuscript is well-written, and this study will be of interest for broad readers of the World Journal of Hematology.

ESPS Peer-review Report
Name of Journal: World Journal of Hematology

ESPS Manuscript NO: 8017

Title: Age may be an independent adverse prognostic factor for overall survival in acute myeloid leukemia

Reviewer code: 02446254

Science editor: Xiu-Xia Song

Date sent for review: 2013-12-11 19:05

Date reviewed: 2014-03-07 07:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Table 1; why does total number of patients in each parameter not coincide with 197? For example, total number of patients in FAB classification is 184 whereas that in myelodysplasia and performance status is 193, and so on. Authors should explain the discrepancy. Page 13, line 5; 22.3~29.9% should be 22.8~29.9% according to Table 1.