ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 10646

Title: Prediction of Synchronous Colorectal Cancers by Conventional CT in Subjects Receiving an Incomplete Colonoscopy: A Single-Center Study

Reviewer code: 00189171

Science editor: Yuan Qi

Date sent for review: 2014-04-12 19:27

Date reviewed: 2014-04-25 03:07

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[Y] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ] Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Pang et al. evaluated the diagnostic accuracy of the computer tomography in patients with synchronous colorectal cancer. It is a well-designed and nicely written paper, however I suggest some minor changes and I have some questions also. In the result section of the abstract, the mentioned risk factors regarding patients with negative abdominal CT should be specify. These factors should be emphasized in the result section of the manuscript itself – I have not found any mentioned regarding these factors. Based on these factors we would able to stratify the indication of the CT in this group of patients. A new CRC in a 6 month time after the operation of the index cancer was defined as a synchronous cancer. Rate of cancer recurrence in the anastomosis of the surgery should be mentioned. As it was a nearly 10 years long study, the changes of the technique of the CT itself should be mentioned. Or was it a retrospective analysis of the CT scans? The operator dependant changes should be taken into consideration also. The average distance between the index tumour and the second one should be included. It is not easy to make a distinction between of two tumours located very close to each other. This data may influence the frequency of the synchronous tumours. I'm interested of the rate of tumours which were missed by the colonoscopy (when the second tumour was more distal in the colon compared to the index tumour) Formal: Statistical methods should be interprete more accurately. The term ?dolichocolon" is not a usual one. I suggest to substitute it.

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Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 10646
Title: Prediction of Synchronous Colorectal Cancers by Conventional CT in Subjects Receiving an Incomplete Colonoscopy: A Single-Center Study
Reviewer code: 02494466
Science editor: Yuan Qi
Date sent for review: 2014-04-12 19:27
Date reviewed: 2014-04-28 21:50

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[Y]Rejection
[Y] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

This is a Single-Center study, and we do not think that results are credible.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 10646

Title: Prediction of Synchronous Colorectal Cancers by Conventional CT in Subjects Receiving an Incomplete Colonoscopy: A Single-Center Study

Reviewer code: 00289357

Science editor: Yuan Qi

Date sent for review: 2014-04-12 19:27

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

This is an interesting well-described study This work is technically well conducted and well written. It addresses an interesting clinical area in an application.