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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 12755
Title: Three-field versus two-field lymph node dissection for esophageal cancer: a meta-analysis
Reviewer code: 00289387
Science editor: Yuan Qi
Date sent for review: 2014-07-25 15:38
Date reviewed: 2014-08-15 08:15

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Existing	[ ] 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	[ ] Existing	[ ] Minor revision
		[ ] No records	[Y] Major revision

COMMENTS TO AUTHORS

The authors reported advantages of three-field (3FL) versus two-field (2FL) lymph node dissection in esophageal cancer treatment, based on a meta-analysis from previously published 2 clinical trials and 18 observations with over 7000 patients. They found a clear benefit for 3FL in 1, 3, 5-year overall survival (OS) compared with 2FL, but more complications associated with 3FL than 2FL. The overall benefit of 3FL vs. 2FL has been long-standing controversial. Therefore, the current research summarizing and analyzing important multiple studies may help clarify the therapeutic strategy with potential benefit for patients. However, significant questions are present in the current report. 1) Although the methodology of the study design is well described, this reviewer is somehow concerned with the absence of collaboration with biostatistician(s) that are expertise in this field. This is of paramount importance in highlighting the conclusion based on its principal component of the Methods in this manuscript. Thus, the conclusion drawn from these analyzed data will convince readers if an expert participates in the study design and data analyses. If someone's position of these authors is also associated with the department of Biostatistics, please add to the title page. Did the authors review disease-free survival (DFS) data or did these studies not report DFS, only OS? 2) Only small portions (e.g. 5 out of 12 studies, 4 out of 13, 3 out of 12 studies in 1, 3, 5-year OS, respectively) demonstrated statistical significance between 3FL and 2FL, although pooled data analyses for individual 1, 3, 5-year OS showed significant difference. Thus, the inconsistence

indicates the complexity and importance of heterogeneity of different studies, which may involve more factors than three ones mentioned by the authors in the Discussion. The benefit of 3FL over 2FL in general may not be evident; instead, it may depend on individual studies that involve a variety of factors. 3) 3FL has more postoperative complications including recurrent nerve palsy and anastomosis leak than 2FL, leading to the conclusion against using 3FL for patients because of the high occurrence of the complications up to 70% of cases and detrimental long-term quality of life. 4) As noted "only 2 randomized trials to date have been published that compared 3FL with 2FL. One trial showed a survival advantage for 3FL; however, patients treated with 2FL were older and had more proximal tumors. In the second trial, the 5-year OS rates were not statistically different between 3FL and 2FL (66.2 and 48%, respectively)" Again, the evidence is against the results from the all pooled data. 5) RCTs? What is the full name?

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ESPS PEER REVIEW REPORT

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Existing	[ ] 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	[ ] Existing	[Y] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

In the submitted manuscript, the authors present a meta-analysis using published data on 3-field lymphadenectomy versus 2-field lymphadenectomy in esophageal carcinoma patients. End points of this meta-analysis were 1-, 3-, and 5-year overall survival rates and postoperative complications. This is an important clinical question and the results of this analysis will likely have an impact on clinical decisions in the future. The meta-analysis was conducted properly, objectively and the results are valid and significant. The authors did not include assessment of the methodological quality of the primary studies, which is a minor weakness, but this reviewer acknowledges that the quality assessment in meta-analysis is controversial, and it might not contribute to the overall conclusions. The conclusions of the manuscript are accurate, and supported by the data. Overall, due to the clinical importance of the question and potential impact of the analysis, I believe the article is suitable for publication in World Journal of Gastroenterology. I have one minor concern that needs to be addressed: In the last sentence of the abstract, the authors state: "However, the results were not highly significant, and 3-field lymphadenectomy was associated with more postoperative complications". I believe that the underlined part of the sentence is too vague, and will not help readers to understand the conclusion. I suggest: "However, due to the high heterogeneity among all 3 outcomes, it is difficult to draw definite conclusions, and 3-field lymphadenectomy was associated with more postoperative complications". I believe that re-phrasing this would clarify the abstract

and help the reader to better understand why this clinical question remains open.

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ESPS PEER REVIEW REPORT

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

COMMENTS TO AUTHORS

The article from China is aim to assess the effects of 3-field lymphadenectomy for esophageal carcinoma. The title is "Three-field versus two-field lymph node dissection for esophageal cancer: a meta-analysis". There have some questions. The authors should to be clarified and be added the following issues in the text. 1. Please add the indications and the contraindications of the three-field and the two-field lymph node dissection for esophageal cancer in the text. When did the physicians should do in each technique? 2. This technique needed the experienced physician. It might not be applied in the community hospitals. 3. Unfortunately, the authors did not show the cost-effectiveness of the study. 4. The clinical application of the study is very important. The authors should to be recommended the readers to apply this knowledge into the routine clinical practice. Thank you so much