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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
Ms: 1773
Title: Differential mucin phenotype and its significance in a variation of colorectal carcinoma
Reviewer code: 00004290
Science editor: h.h.zhai@wjgnet.com
Date sent for review: 2013-01-05 14:35
Date reviewed: 2013-01-16 08:58

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	[ ] 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	[Y] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS

COMMENTS TO AUTHORS:
The study by Imai et al. is important and interesting. I have following comments: 1) The abstract section is too long-need to be trimmed down. 2) Why the MUC2 expression is less in cancer, level 0 (Figure 1B) compared to normal (Figure 1A)? 3) Was the immunohistochemical study done blindly?

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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
Ms: 1773
Title: Differential mucin phenotype and its significance in a variation of colorectal carcinoma
Reviewer code: 00058121
Science editor: h.h.zhai@wjgnet.com
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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
[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	[Y] Major revision

COMMENTS

COMMENTS TO AUTHORS:
GENERAL COMMENTS (1) The aim of this research and its results are of some scientific interest. Though there is a large body of publication in the role of MUC2 and MUC5AC expression in CRC, this study adds some small refinements in the already known (e.g. the expression of MMR proteins (dMMR% in PDA/MUC5AC which is appropriately analyzed with sufficiently powered results) (2) Though there is no novelty and innovation in this research because issues such as the role of MUC2 and MUC5AC expression in CRC patients survival, adenoma-carcinoma sequence, expression of the MMR proteins, relation to clinicopathological parameters have already been addressed previously. On the contrary, bibliography is conflicting and this study adds its own evidence. (3) Presentation and readability of the manuscript is very good (4) Ethical issues are fully covered SPECIFIC COMMENTS Title accurately reflects the major topic and contents of the study. Abstract gives a clear delineation of the research objectives, methods, results and conclusions. Page 4, lines 4-5 should be transferred to conclusions. The design of the study is rational and reliable, and the statistical methods used are appropriate. Page 8, lines 1-12: should be transferred to discussion or in a shorter version to the introduction. The results partly provide sufficient data to draw scientific conclusions for the following reasons: 1. The sample size in the adenoma carcinoma sequence has to be seen cautiously: a) considering PDA/MUC2 (Observations per sample = 7) with a Spearman's rank correlation coefficient (Rho) = 0.25 and applying t-Test for Zero Correlation (power 0.80): Sample Size should

be 123 per arm and b) considering MUA/MUC5AC (Observations per sample = 10) with a Spearman's rank correlation coefficient (Rho) = 0.22 and applying t-Test for Zero Correlation (power 0.80): Sample Size should be 159 per arm. 2. 3. The impact of MUC2 and MUC5AC expression in PFS and OS must be presented with Caplan-Meier curves after their significance has been documented in multivariate analysis in the Cox's Proportional Hazard model which is not the case in this paper. Authors have compared PDA/MUC2 (-) versus PDA/MUC2 (+) and PDA/MUC5AC (-) versus PDA/MUC5AC (+) with the Log-Rank test while these parameters had not been significant in the multivariate analysis. The same stands in cases of WMDA and MUC comparisons. Discussion is well organized, and excellent systematic theoretical analysis and useful literature review are provided. The statement "MUC2 expression was associated with better prognosis in WMDA but MUC5AC expression was associated with better prognosis in PDA." in Conclusions is wrong since it is based in statistical flaw. References are appropriate, relevant, and updated. Tables and figures: tables reflect the major findings of the study, and they are appropriately presented. Figures 4, 5 and 6 are not appropriate since the MUC2/MUC5AC were not independent predictors of PFS or OS.