

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6822

Title: Endoscopic treatment for early gastric cancer

Reviewer code: 02462307

Science editor: Qi, Yuan

Date sent for review: 2013-10-29 19:16

Date reviewed: 2013-11-10 13:45

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" 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	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

I enjoyed reading this review about endoscopic resection (ER) for EGC. The history and present situation of ER for EGC was written compactly. I do not have major comments. Some minor comments are as follows. 1. Techniques of endoscopic treatment for EGC, 2. ESD, first paragraph. "ESD permits en bloc resection of larger lesions that can be treated with EMR". Is it correct that "ESD permits en bloc resection of larger lesions that can not be treated with EMR"? 2. Complications, 1. Bleeding, third paragraph. You showed that "Significant immediate bleeding occurs more often in the upper and middle thirds of the stomach than in the lower third of the stomach because of the larger diameter of the submucosal arteries in the upper and middle thirds of the stomach." But afterwards, You also say that "At first, delayed bleeding was reported to occur more frequently after ESD for lesions in the lower and middle thirds of the stomach compared to the upper third of the stomach." This expression was confusing. I think first sentence is not necessary. 3. Out comes. "In a retrospective study of EGC that fulfilled the expanded criteria, en bloc resection was achieved in 94.9% (559/589) and 550 of 581 lesions (94.7%) were deemed to have undergone curative resection." Which were references cited of this sentence?

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6822

Title: Endoscopic treatment for early gastric cancer

Reviewer code: 02440486

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" 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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This review summarized endoscopic treatment for early gastric cancer, including the conventional and expanded indications, complications and outcomes. Generally speaking, it is a good review and has significant clinical value. However, there are some minor shortcomings for this article: 1. How to clinically evaluate the EGC? For example, use endoscopic ultrasounography? MRI? or CT? 2. If the pathological results after EMD were not consistant with preoperative stage, in other words, if the patient was judged to be an invasive cancer, how to salvage? surgery? chemoradiotherapy? or others? 3. There are some grammar mistakes, please check carefully. Please revise the article.

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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 checked="" 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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

It's an informative review and good for publication.