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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 80701

Title: Hereditary polyposis syndromes remain a challenging disease entity: Old dilemmas and new insights

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02904061
Position: Peer Reviewer
Academic degree: MD, PhD
Professional title: Chief Doctor, Doctor, Professor, Manager
Reviewer's Country/Territory: China
Author's Country/Territory: Denmark

Manuscript submission date: 2022-10-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-10 15:00

Reviewer performed review: 2022-10-20 12:49

Review time: 9 Days and 21 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No

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Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

this editorial presents an overview in the management of hereditary polyposis syndromes, including surgery, endoscopic management and chemoprevent. This paper expounds the clinical diagnosis and treatment of various polyposis in detail, but lacks some latest research data. Whether Figure 1 is not fully displayed due to some problems, it looks a bit simple.

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Reviewer's code: 04928215
Position: Peer Reviewer
Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: Denmark

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Reviewer chosen by: AI Technique

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Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

In this editorial, the authors report an overview of the management of hereditary polyposis syndromes, the familial adenomatous polyposis, the juvenile polyposis syndrome and the Peutz-Jegher syndrome. The text is is not comprehensive and shallow. Therefore, before publication, I believe that the following changes should be made: GI polyps and polyposis syndromes GI most likely refers to 'gastrointestinal', it should be indicated for greater clarity. Genetic devolution - 'Familial Adenomatous Polyposis (FAP)': in this case it can only be indicated with 'FAP', having already explained the acronym previously. - Figure 1 does not shows the genes reported in the text. Expand the phenotype This section should be deepened. They report the genotype-phenotype correlation, characteristic of these syndromes. In this regard, the authors could benefit from reading the following articles, the contents of which could be useful for improving the manuscript: 1. PMID: 29954149 DOI: 10.3390/genes9070322 2. PMID: 27326320 DOI: 10.4251/wjgo.v8.i6.509 Surgical management of hereditary polyposis Peutz-Jeghers syndrome (PJS), juvenile polyposis syndromes (JPS): in this case they can only be indicated with 'PJS and JPS', having already explained the acronyms previously. Lower GI endoscopy and surgery This paragraph is reported in a confused way. The authors must treat each syndrome separately, as done in others paragraphs, indicating overview on endoscopic and surgery for each syndrome. In addition they should also refer to chromoendoscopy, and the use of cap-assisted endoscopy that have shown promise for enhanced lesion detection rates. Figure 2 - It should be indicate as table 1. Figure 3 - Figure 3 is not indicated in the text. - In figure 3d reference is made to Cowden's sndrome, not mentioned in the text References Some relevant documents are missing, among which: PMID:

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