

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 86635

Title: Predicting Lymph Node Metastasis in Colorectal Cancer: An Analysis of Influencing Factors and Risk Model Development

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06540813

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2023-08-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-08-18 09:51

Reviewer performed review: 2023-08-30 08:38

Review time: 11 Days and 22 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

It's a retrospective study that attempts to construct a risk prediction model for predicting CRC lymph node metastasis. Although the manuscript provides valuable insights and innovations, there are some issues that may need further attention, as follows: 1. The article mentions that the study was conducted at two hospitals, but the conclusion describes a "single-center background," which may be contradictory. 2. In line 15 on page 6, the authors used LNM as the outcome variable and 16 predictors, however, they only listed "age, gender, tumor positioning, size, differentiation, depth of invasion, lymphovascular invasion, perineural invasion, tumor budding, and the frequency of the top ten clusters. "A total of 10 predictors, is it a descriptive error? 3. It is suggested to add a flow chart for the division of the study population to present it more clearly. 4. There are two ** symbols in Table 3, but there is no explanation for this symbol, please add. In addition, the logic of the article is very clear and can be published after addressing the aforementioned issues.

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 86635

Title: Predicting Lymph Node Metastasis in Colorectal Cancer: An Analysis of Influencing Factors and Risk Model Development

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06110697

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor, Research Dean

Reviewer's Country/Territory: Sweden

Author's Country/Territory: China

Manuscript submission date: 2023-08-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-08-21 08:21

Reviewer performed review: 2023-08-30 10:04

Review time: 9 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Overall, this article is well written. Yun-peng Lei et al. conducts a retrospective study on rectal cancer patients in two Peking University Shenzhen hospitals and constructs and analyzes a risk prediction model for predicting CRC lymph node metastasis. This model has more predictive factors than the other three existing models (Kikuchi's model, Ueno's model, Krogue's model), indicating that it may be more sensitive in prediction. However, there are still some limitations due to factors such as a small sample size. The article has a clear logical structure, providing a detailed introduction to the materials and methods of the prediction model. The value of this research is also explained, and the limitations of the study are clearly stated at the end of the article. The Figures and Tables in the article are well-summarized and visually intuitive. Overall, this study is highly readable. There is a minor suggestion: since the focus of the article is on the analysis and construction of the model, there is relatively little information about treatment strategies. It is recommended to remove the term "treatment strategies" from the keywords. Thank you for giving me the opportunity to review this study.

Reviewer #1:

Specific Comments to Authors: Overall, this article is well written. Yun-peng Lei et al. conducts a retrospective study on rectal cancer patients in two Peking University Shenzhen hospitals and constructs and analyzes a risk prediction model for predicting CRC lymph node metastasis. This model has more predictive factors than the other three existing models (Kikuchi's model, Ueno's model, Krogue's model), indicating that it may be more sensitive in prediction. However, there are still some limitations due to factors such as a small sample size. The article has a clear logical structure, providing a detailed introduction to the materials and methods of the prediction model. The value of this research is also explained, and the limitations of the study are clearly stated at the end of the article. The Figures and Tables in the article are well-summarized and visually intuitive. Overall, this study is highly readable. There is a minor suggestion: since the focus of the article is on the analysis and construction of the model, there is relatively little information about treatment strategies. It is recommended to remove the term "treatment strategies" from the keywords. Thank you for giving me the opportunity to review this study.

Removed the term "treatment strategies" from the keywords to better align with the focus of the article

Reviewer #2:

Specific Comments to Authors: It's a retrospective study that attempts to construct a risk prediction model for predicting CRC lymph node metastasis. Although the manuscript provides valuable insights and innovations, there are some issues that may need further attention, as follows: 1. The article mentions that the study was conducted at two hospitals, but the conclusion describes a "single-center background," which may be contradictory. 2. In line 15 on page 6, the authors used LNM as the outcome variable and 16 predictors, however, they only listed "age, gender, tumor positioning, size, differentiation, depth of invasion, lymphovascular invasion, perineural invasion, tumor budding, and the frequency of the top ten clusters. "A total of 10 predictors, is it a descriptive error? 3. It is suggested to add a flow chart for the division of the study population to present it more clearly. 4. There are two ** symbols in Table 3, but there is



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no explanation for this symbol, please add. In addition, the logic of the article is very clear and can be published after addressing the aforementioned issues.

1.Removed the "single-center background" to eliminate the discrepancy with the study being conducted at two hospitals.

2.Corrected the descriptive error on page 10, line 15, to accurately list all 10 predictors used in the study.

3.Added a flow chart to more clearly present the division of the study population.

4.Removed the ** symbols in Table 3 as they were not necessary for the interpretation of the table.