



### ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 16272

**Title:** Incidence and treatment of brain metastasis in patients with esophageal carcinoma

**Reviewer’s code:** 03087223

**Reviewer’s country:** United States

**Science editor:** Yuan Qi

**Date sent for review:** 2015-01-08 17:10

**Date reviewed:** 2015-01-17 04:12

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

The present review provides insights into the current and global view on the incidence of brain metastasis from esophageal carcinoma (BMEC). The authors shed light on the different reports in regard to BMEC and compared studies made in three different countries: USA, Japan and China. The manuscript is well designed and written. However, the following issues need to be addressed in order to extend the understanding of BMEC to a broader community. 1. The first part of the abstract: “The incidence....in the three countries” is re-used as it is in the core tip of the manuscript. Although the global description remains unchanged, authors might have to write this paragraph with a different lexical approach (rewrite the sentences). 2. The description of reports on BMEC is well written and referenced in the introduction. However, the authors should show in a figure/diagram, the progression of esophageal tumor pathology, or at least the classification, as described in the text. 3. In the chapter “Incidence of BMEC”, the authors claimed: “Until recently, a large number of BM has been detected by MRI, of which only a small proportion has been pathologically confirmed”. The authors should argue in terms of percentage. 4. In the chapter “Auxiliary treatment of esophageal cancer promotes BMEC”, it is written: “The risk for occurrence of BM between the two groups was



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compared. Years later, they found that 29 patients (six from the control group and 23 from the intervention group) developed BM, 20 of who developed BM within one year". Could the authors specify how long after the patients developed BM? 5. The following sentence should be re-written: "Moreover, some authors believe that not only the disease itself, but also adjuvant chemo-radiation that affects the development of distant metastasis and reduces survival. 6. In the chapter #6, the authors reported the case of a patient with squamous cell carcinoma who has exhibited 14 years survival post brain surgery and chemotherapy for BMEC; and they mentioned the case as the one with the longest survival time among BMEC patients. Although the finding is interesting, the report should be published first in a peer-review journal before being described in the current review. 7. The authors should add references to the following: "Recently, the difference in survival time of patients with adenocarcinoma BMEC and those with squamous cell carcinoma BMEC has been debated". 8. In the chapter #7, the authors have emphasized on the correlation between a genetic disease and BMEC. The disease should be at least clearly named, described and discussed.

## ESPS PEER-REVIEW REPORT

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<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

(1) In the introduction, the authors stated "We searched the literature from PubMed and found 257 reports from 12 countries on BMEC". It is not clear how many of these reports were included in this analysis and the author should present these numbers. There are not many cases of BMEC and therefore it should not be difficult to include all recent studies done in US, Japan and China. If the author had not included all the studies, the selection criteria should be clearly discussed in the text.

(2) Following up on the point above, how many studies in each country are included in the analysis of table 1? References are missed in the table. (3) The authors had done a relatively good job in summarizing the treatment options for BMEC, but the discussion on incidence was very short. The authors did not discuss whether there is any difference in incidence of BMEC between the three countries. It will also be worthwhile to discuss whether the incidence of BMEC correlates with that of esophageal carcinoma. Moreover, is there any genetic or environmental factor that may increase the risk of BMEC? (4) A timeline diagram illustrating the milestones and new discoveries of BMEC (e.g. first case reported, new therapies introduced, etc) can be added.



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## ESPS PEER-REVIEW REPORT

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<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
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<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

### COMMENTS TO AUTHORS

1. Country wise reports about tumor arising esophageal cancer is insufficient, need to mention some further reports. In addition, the authors need to debate about this carcinoma in countries other than Japan, China precisely. 2. There are some grammatical errors which need to be corrected. 3. Besides, incidences I would suggest authors to include a brief summary of various causes of the reported incidents. 4. The authors should include recent advances in the treatment of brain metastasis.