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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Oncology*

Manuscript NO: 85034

Title: Gastric neuroendocrine tumors in a BRC Y germline mutation carrier: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05342613
Position: Editorial Board
Academic degree: FACS

Professional title: Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2023-04-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-04-25 09:28

Reviewer performed review: 2023-04-25 09:32

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

It is interesting that it is the first case detected in a patient with a genetically inherited breast tumor. The clinical picture developed in line with expectations. Histopathological examination was successful. I believe that it will contribute to the literature and readers.

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Reviewer's code: 02978155
Position: Peer Reviewer
Academic degree: MD, PhD
Professional title: Assistant Professor, Professor
Reviewer's Country/Territory: Italy
Author's Country/Territory: China

Manuscript submission date: 2023-04-08
Reviewer chosen by: Geng-Long Liu
Reviewer accepted review: 2023-05-20 20:23
Reviewer performed review: 2023-05-25 08:16
Review time: 4 Days and 11 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

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

SPECIFIC COMMENTS TO AUTHORS

This paper deals with an interesting topic regarding gastric neuroendocrine neoplasms. However, some limitations should be highlighted 1. The study presents a single case report, which limits the generalizability of the findings. Therefore the conclusion should be more cautious, as case reports provide valuable clinical insights but are inherently limited in their ability to establish broader conclusions or make definitive recommendations. 2. Molecular analysis and significance: While the identification of a pathogenic germline mutation in the BRCA2 gene is noteworthy, the study does not delve into the functional implications of this mutation on the development or progression of gastric NETs. Further investigations are needed to elucidate the precise role of BRCA2 mutations in the pathogenesis of gastric NETs. This should be added to discussion. 3. Treatment implications: The study suggests that PARP inhibitors may be used for type 1 ECL-cell NETs with recurrence, metastasis, or other gastric cancers. However, this recommendation is based on a single case report and lacks clinical trial data or evidence supporting the efficacy of PARP inhibitors specifically in this context. Further research is necessary to validate the therapeutic potential of PARP inhibitors for

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this specific subtype of gastric NETs. 4. Instead, as a critique, the authors should have also discussed the potential treatment with somatostatin analogs as an alternative to surgery, as previously described in other studies for the management of unresectable multiple gNENs (PMID 26078554). Indeed, the authors should have addressed the potential use of somatostatin analogs as a therapeutic option for managing multiple gNENs that are not amenable to endoscopic treatment, especially if they are well-differentiated and type 1, as in the case reported. Previous studies have shown good results with somatostatin analogs in controlling tumor growth and symptoms associated with gNENs (PMID: 32213066, PMID: 26321479). Including a discussion on this treatment, modality would have provided a more comprehensive evaluation of therapeutic options for the reported case. 5. Additionally, the histological description of the tumor should be more comprehensive in the "Final diagnosis" section, particularly defining the tumor as well/moderately/poorly differentiated with a mitotic count of 0? and Ki-67 index of 1?. These parameters are crucial in determining the grade and aggressiveness of the tumor and should be explicitly mentioned in the text to provide a more comprehensive understanding of the tumor's histological features. Including these additional discussions and providing a complete histological description would enhance the study's overall scientific rigor and clarity. Finally, the language should be revised. In conclusion, while this study presents an interesting case of a gastric neuroendocrine tumor with a BRCA2 gene germline mutation, several limitations and areas for further investigation should be considered. Future studies with larger sample sizes, comparative analyses, and well-designed methodologies are necessary to validate and expand upon these initial findings and explore the clinical implications in a broader context.