

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12431

Title: Current state of early detection of pancreatic cancer and an approach for future: expanding the higher-risk group with clinical and metabolomics parameters

Reviewer code: 00503452

Science editor: Ya-Juan Ma

Date sent for review: 2014-07-08 16:40

Date reviewed: 2014-08-11 19:37

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The Authors make a review of the present status of the early detection on pancreatic cancer suggesting that metabolomics may help to detect some useful markers in in a high risk group population. The article is well written even if the paper is too long and some concepts are repeated in the text in different paragraphs (see familiar pancreatic cancer).

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Title: Current state of early detection of pancreatic cancer and an approach for future: expanding the higher-risk group with clinical and metabolomics parameters

Reviewer code: 00043116

Science editor: Ya-Juan Ma

Date sent for review: 2014-07-08 16:40

Date reviewed: 2014-08-07 13:26

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Manuscript NO: 12431 Current state of early detection of pancreatic cancer and an approach for future: expanding the higher-risk group with clinical and metabolomics parameters Summary: Authors reviewed current status of pancreatic cancer early detection scheme and potential approach being considered for a future application. Comments: Early detection of pancreatic cancer is of interest, and beneficial for patients, but is still challenging. Thus, the review on this subject is useful in clinical practice. I have some questions as below. 1. Page 2, line 8-9. Authors wrote as following; "In this article, we will review the current status of the PDAC cancer detection/diagnostic modalities". But in this review, they mentioned only EUS as an imaging diagnostic modality. How are other imaging modalities such as CT, MRI, or PET? 2. Page 2, line 16. Refs [19-22] were published almost 20 years ago. It would be better to update and cite more recent papers. 3. Can authors summarize current early detection schemes of pancreatic cancer in figure or table? Such table or figure would be helpful for clinicians. 4. Page 10, line 12-16. Authors wrote as following; "As we continue to translate the advancement of biological understanding of PDAC, we strongly anticipate useful biomarkers would become available in the near future which would help to identify the significantly higher-risk individuals within the general population for developing early-stage PDAC". But in this paragraph, I am not sure what is the advancement of biological understanding of PDAC, and what advancement can be a useful biomarker. Please write more clearly referring previously

published papers. Or it might be better to delete this sentence. 5. "Translational Research-Application of Metabolomics Approach" section. Overall, this section is not so specific to PDAC. Authors explained how important metabolomics in cancer progression generally. It is not clearly reviewed what metabolomics of PDAC can affect progression of PDAC, and can be a biomarker. For example, how are associations of p53, Akt1, or HIF with PDAC? Can these markers be a effective biomarker for PDAC? Because this is a review for PDAC, they need to focus on PDAC more specifically. 6. "Translational Research-Application of Metabolomics Approach" section. Please explain the importance of the Warburg effect in PDAC with some references. 7. Authors wrote as following; "As such, metabolomics biomarker applications for breast, prostate, esophagus, liver, kidney, ovarian, colorectal cancers have been reported by various groups". Are there any papers about metabolomics biomarker applications for PDAC? 8. Page 12, line 8-13. Why can amino acids, bile acids, and a number of lipids and fatty acids be a biomarker for PDAC? Please briefly explain. 9. Figure 1. Is it authors' research data? Review paper usually doesn't include authors' research result. Or just example? 10. Figure 1. Can authors add explanation about which small molecules or metabolites have a potential to discriminate PDAC from control based on this figure 1?

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Title: Current state of early detection of pancreatic cancer and an approach for future: expanding the higher-risk group with clinical and metabolomics parameters

Reviewer code: 00054993

Science editor: Ya-Juan Ma

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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 type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input 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 type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This review covers the epidemiology of pancreatic ductal adenocarcinoma and is focussing on ways to improve the currently deplorable state of early detection and treatment outcomes of PDAC. The arguments to utilize clinical and metabolomics parameters to better define subsets of the general population for pancreatic cancer screening are well taken and the proposal sounds promising. Ref. 30 and 31 lack their years of publication.