

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29181

**Title:** Response to olaparib in BRCA1-mutated gallbladder cancer: A case report

**Reviewer's code:** 02992676

**Reviewer's country:** Australia

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-01 08:30

**Date reviewed:** 2016-08-06 13:45

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

## COMMENTS TO AUTHORS

Very interesting case report. After some minor revision of the language, it can be accepted for publication.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29181

**Title:** Response to olaparib in BRCA1-mutated gallbladder cancer: A case report

**Reviewer's code:** 02936371

**Reviewer's country:** South Korea

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-01 08:30

**Date reviewed:** 2016-08-11 10:17

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input 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 type="checkbox"/> No	<input 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 type="checkbox"/> No	

## COMMENTS TO AUTHORS

Interesting case. In this manuscript, the authors reported a 74-year-old man, with a past history of primary hypertension, atrial fibrillation, coronary disease and cholelithiasis, presented with epigastric pain. The patient underwent a robot-assisted prostate cancer surgery and his mother had died of esophageal cancer. Abdomen CT revealed multiple low-density intrahepatic lesions besides gallbladder. PET-CT revealed multiple hypermetabolic intrahepatic lesions apart from porta hepatis. Then a paroscopic exploration was performed and an intrahepatic biopsy was conducted. Based on the gene alteration testing report and the clinical trial studies, the patient was started on olaparib 400 mg twice daily. The patient can tolerate the dose and subsequently his pain was relieved significantly. CT of the abdomen revealed the shrinkage of both intra and extra hepatic lesions and even some extra hepatic lesions appeared to be invisible. The patient responded well to olaparib until the occurrence of obstructive jaundice. CT of the abdomen indicated that intrahepatic lesions dwindled, nevertheless, extrahepatic lesions became large and progressed. Subsequently, a PTCD was performed to reduce the serum bilirubin level and the olaparib treatment was suspended since then. We intended to resume olaparib treatment in combination with platinum agents after some while.



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Unfortunately, the patient passed away as a result of severe biliary tract infection. 1 The manuscript need some language editing before publication. 2 The discussion and references are good. 3 Figures are good.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29181

**Title:** Response to olaparib in BRCA1-mutated gallbladder cancer: A case report

**Reviewer's code:** 02992572

**Reviewer's country:** Japan

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2016-08-01 08:30

**Date reviewed:** 2016-08-15 16:30

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [ Y] Accept
<input type="checkbox"/> [ Y] Grade B: Very good	<input type="checkbox"/> [ Y] Grade B: Minor language polishing	<input type="checkbox"/> [ ] The same title	<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"/> [ ] Duplicate publication	<input type="checkbox"/> [ ] Rejection
<input type="checkbox"/> [ ] Grade D: Fair	<input type="checkbox"/> [ ] Grade D: Rejected	<input type="checkbox"/> [ ] Plagiarism	<input type="checkbox"/> [ ] Minor revision
<input type="checkbox"/> [ ] Grade E: Poor		<input type="checkbox"/> [ ] No	<input type="checkbox"/> [ ] Major revision
		BPG Search:	
		<input type="checkbox"/> [ ] The same title	
		<input type="checkbox"/> [ ] Duplicate publication	
		<input type="checkbox"/> [ ] Plagiarism	
		<input type="checkbox"/> [ ] No	

## COMMENTS TO AUTHORS

Good case. No comments.