

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 73855

Title: Improving the accuracy and consistency of clinical target volume delineation for

rectal cancer by an education program

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03699989

Position: Peer Reviewer

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2021-12-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-12 10:09

Reviewer performed review: 2021-12-21 13:58

Review time: 9 Days and 3 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] 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	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This study tested the potential usability of an educational program and found that the program could improve the accuracy of and consistency of preoperative radiotherapy CTV delineation for rectal cancer. Despite the limitations mentioned in the manuscript, this study showed the possibility of the educational program. This study was well conducted and the manuscript was well written. But, there are some minor faults: - (page7) Hu --> HU (Hounsfield units). - (page9) Wilcoxon singed-rank test is used in a set of matched samples, NOT Wilcoxon rank sum test. The authors should check whether proper statistical methods were used.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 73855

Title: Improving the accuracy and consistency of clinical target volume delineation for

rectal cancer by an education program

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04123904

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-12-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-22 08:43

Reviewer performed review: 2021-12-22 10:13

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
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) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



leng 160, Plea 160, Plea Telepho: E-mail: b https://

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

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

SPECIFIC COMMENTS TO AUTHORS

This is a well written article but has some concerns to be addressed. #Major comments In this study, a case of stage IIIC (T3N2bM0) rectal adenocarcinoma was selected, and participants completed a CTV delineation prior to the educational program. Real-time feedback on the deficiencies in each participant's delineation was then provided, and a question-and-answer period was provided for further clarification. The participants then delineated the CTV again using the same case, and the parameters were compared before and after the program. However, it is natural that the parameters would improve when examined in this way, and furthermore, the sample size is small. Therefore, I don't agree with the conclusion that this educational program is effective based on these results. I think it is necessary to prove that the CTV delineation variation and interobserver variation (IOV) can decrease using another one or several cases after the educational intervention.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 73855

Title: Improving the accuracy and consistency of clinical target volume delineation for rectal cancer by an education program

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03805385

Position: Peer Reviewer

Academic degree: FASCRS, MD, PhD

Professional title: Assistant Professor, Attending Doctor, Doctor, Medical Assistant,

Postdoctoral Fellow, Research Associate, Senior Research Fellow, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2021-12-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-23 18:30

Reviewer performed review: 2021-12-23 19:49

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Thank you very much for the opportunity to review this excellent paper. This is an original paper: Improving the accuracy and consistency of clinical target volume delineation for rectal cancer by an education program With the aim of examine whether an education program could improve the accuracy and consistency of preoperative radiotherapy CTV delineation for rectal cancer. And the conclusion of the wide variations in the delineation of CTV for rectal cancer were present among radiation oncologists. Inappropriate inclusion of the external iliac region and ischiorectal fossa were the two main issues in the CTV contouring. A well-structured education program could improve delineation accuracy and reduce interobserver variations. It is feasible to incorporate such a program into the continuing education programs for Excellent quality of the study. radiation oncologists. The limitations including a small sample size and only a single case for contouring. Furthermore, the long-term outcomes were not assessed; thus, it is unclear whether the education program is associated with lasting effects. Further studies need to include more participants and rule out possible selection biases resulting from a single patient and anatomic differences by tumor locations.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 73855

Title: Improving the accuracy and consistency of clinical target volume delineation for rectal cancer by an education program

recur curcer by un curculon program

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05766996

Position: Editorial Board

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: Romania

Author's Country/Territory: China

Manuscript submission date: 2021-12-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-22 07:18

Reviewer performed review: 2021-12-29 20:07

Review time: 7 Days and 12 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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

SPECIFIC COMMENTS TO AUTHORS

First, the manuscript has limited original findings. No new phenomena were found in this study. Wide variations in CTV delineation for rectal cancer are observed among radiation oncologists in mainland China. Second, this paper does not contain new concepts or methods. The present study is based on the usual methods and it does not unfortunately solve the problems under discussion. Third, this publication does not have an impact on the basic science, but it can produce some improvements in current clinical practice.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 73855

Title: Improving the accuracy and consistency of clinical target volume delineation for rectal cancer by an education program

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04123904

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-12-10

Reviewer chosen by: Jing-Jie Wang (Online Science Editor)

Reviewer accepted review: 2022-02-03 04:46

Reviewer performed review: 2022-02-03 08:59

Review time: 4 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] 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
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous





statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have carefully revised the manuscript according to the reviewer's comments.

I have no additional comments on this manuscript.