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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
Ms: 2142
Title: First-line erlotinib and fixed dose-rate gemcitabine for advanced pancreatic cancer
Reviewer code: 00069774
Science editor: x.x.song@wjgnet.com
Date sent for review: 2013-01-31 17:06
Date reviewed: 2013-02-09 20:04

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[Y] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS

COMMENTS TO AUTHORS:
Few questions that authors may want to reply. 1. Have authors classified patients according to histological subtypes, smoking status, EGFR mutations and etc, putative predictors of TKIs in NSCLC ? 2. Was there any patient required interventions for palliative treatment for bile duct obstruction or any other complications. Authors may mention some of these interventions in the context of drug response. Minor comments 1. p5, first para, these patients were diagnosed by cytology ? 2. p5, 2nd para, FDR was given weekly for 7 consecutive weeks and day1,8,15 of 4-week a cycle for max 6 cycles. How comes the 7 consecutive weeks? 3. p9, 2nd para, skin rash (any grade, $p<0.0001$) were significant, independent predictors of longer PFS (Table 2). Should the Table be the number 4? 4. The overall discussion is rather lengthy. Some part, particularly, p11, 2nd para should be removed or discussed in brief only in the relevant context. 5. Table 1. Authors should mention the unit for "Interval between symptoms and treatment"? (week) , Number of administration ? is the number of cycle? 6. Table 2 should be removed, as it is unnecessary, there was no difference in all patients and metas groups.

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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
Ms: 2142
Title: First-line erlotinib and fixed dose-rate gemcitabine for advanced pancreatic cancer
Reviewer code: 00503748
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS

COMMENTS TO AUTHORS:

1 In the part of introduction, "The addition of erlotinib, an oral epidermal growth factor receptor (EGFR) tyrosine kinase inhibitor, to Gem has produced a minimal, albeit statistically significant, improvement in overall survival (OS), leading to FDA approval of the Gem/erlotinib combination in the setting of advanced, inoperable PDAC." Should be given reference. 2 In the part of statistics, should give the statistical software that was used. 3 This was a single-arm prospective, multicentre, open-label phase II study. So there should be a illustration of approval by ethics committee in the paper. 4 The tables and figures are not standard. They should be modified. 5 The following references have not the year of publish. Please add. Vaccaro V, Gelibter A, Bria E, Iapicca P, Cappello P, Di Modugno F, Pino MS, Nuzzo C, Cognetti F, Novelli F, Nistico P, Milella M. Molecular and genetic bases of pancreatic cancer. Curr Drug Targets Jun; 13(6): 731-743. [PMID: 22458519] Conroy T, Desseigne F, Ychou M, Bouche O, Guimbaud R, Becouarn Y, Adenis A, Raoul JL, Gourgou-Bourgade S, de la Fouchardiere C, Bennouna J, Bachet JB, Khemissa-Akouz F, Pere-Verge D, Delbaldo C, Assenat E, Chauffert B, Michel P, Montoto-Grillot C, Ducreux M. FOLFIRINOX versus gemcitabine for metastatic pancreatic cancer. N Engl J Med May 12; 364(19): 1817-1825. [PMID: 21561347 DOI: 10.1056/NEJMoa1011923] Milella M, Gelibter AJ, Pino MS, Bossone G, Marolla P, Sperduti I,

Cognetti F. Fixed-dose-rate gemcitabine: a viable first-line treatment option for advanced pancreatic and biliary tract cancer. Oncologist; 15(2): e1-4. [PMID: 20189980 DOI: 10.1634/theoncologist.2008-0135]. Aranda E, Manzano JL, Rivera F, Galan M, Valladares-Ayerbes M, Pericay C, Safont MJ, Mendez MJ, Irigoyen A, Arrivi A, Sastre J, Diaz-Rubio E. Phase II open-label study of erlotinib in combination with gemcitabine in unresectable and/or metastatic adenocarcinoma of the pancreas: relationship between skin rash and survival (Pantar study). Ann Oncol Jul; 23(7): 1919-1925. [PMID: 22156621 DOI: 10.1093/annonc/mdr560] Klapdor R, Klapdor S, Bahlo M. Combination therapy with gemcitabine (GEM) and erlotinib (E) in exocrine pancreatic cancer under special reference to RASH and the tumour marker CA19-9. Anticancer Res May; 32(5): 2191-2197. [PMID: 22593509