



PEER-REVIEW REPORT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 49553

Title: The long-term efficacy of capecitabine plus oxaliplatin chemotherapy on stage III colon cancer: A meta-analysis

Reviewer’s code: 02856239

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer’s country: United States

Author’s country: China

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2019-06-26 18:34

Reviewer performed review: 2019-06-26 18:48

Review time: 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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This is a great study as is. I see no strong evidence of publication bias. Analyses are properly conducted in large part. I have just a few comments. Now, tumor molecular pathology assessment is routine part of clinical practice. This information is missing. That should be discussed as a weakness. Treatment effect is unlikely uniform across different molecular subtypes. Related to the above point, the authors should discuss molecular pathological epidemiology (MPE) as a future direction. MPE is an integrative science to deal with molecular pathology in relation to clinical features and outcome in patients and populations. MPE references can be easily found by google search (eg, Gut 2011; Annu Rev Pathol 2019, etc.).

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



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Name of journal: World Journal of Meta-Analysis

Manuscript NO: 49553

Title: The long-term efficacy of capecitabine plus oxaliplatin chemotherapy on stage III colon cancer: A meta-analysis

Reviewer's code: 03478911

Position: Editorial Board

Academic degree: PhD

Professional title: Chief Technician, Executive Vice President, Research Assistant Professor

Reviewer's country: South Korea

Author's country: China

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2019-08-17 08:18

Reviewer performed review: 2019-08-26 02:02

Review time: 8 Days and 17 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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			<input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

This meta-analysis by the authors investigated the long-term efficacy of neoadjuvant chemotherapy of XELOX (Xeloda + Oxaliplatin) targeting colorectal cancer. Although the analysis from various clinical cases is well presented, there are some questions that need to be compensated for. 1. In the part of the purpose (line 30-31), there is a description "The study of colon cancer alone is rare, and the impact of chemotherapy on long-term survival is not clear.". This reviewer can't agree to this. Many clinical studies for the long-term survival or efficacy of XELOX have already been published (J Cancer. 2018; 9(8): 1365-1370). The authors must provide correct information in the background. 2. The reason why XELOX has been studied a lot in rectal cancer than colon cancer is that "XELOX + Radiation therapy (RT)" has been used as standard therapy (more usually Xeloda + rt). This clinical background was not described. 3. As described in the background by the authors, FOLFOX (5-FU + folinic acid + Oxaliplatin) is usually the first choice for colorectal cancer treatment without RT. There is very a few information about the advantages of using XELOX as an alternative to FOLFOX. 4. FOLFIRI (5-FU + LV + Irinotecan) is used as 2nd line standard therapy for treating colorectal cancer following the 1st line therapy, FOLFOX. Information on the major clinical implications of selecting XELOX instead of standard primary and secondary treatment is missing. 4. The inclusion and exclusion criteria for this meta-analysis have missed a critical description. If the author's meta-analysis has purpose to compare the long-term outcome of patients undergoing adjuvant treatment after stage 3 colon cancer surgery with neoadjuvant treatment such as FOLFOX and FOLFIRI, the author must investigate if he or she received neoadjuvant treatment prior to surgery. The search must include a distinction between patients who performed or did not perform neoadjuvant.



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