

# PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 82972

Title: Advances in translational therapy for locally advanced gastric cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 06280646

**Position:** Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2023-01-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-02 10:45

Reviewer performed review: 2023-01-02 10:46

Review time: 1 Hour

	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No scientific significance</li> </ul>
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

### SPECIFIC COMMENTS TO AUTHORS

Good work. No major comment



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Manuscript NO: 82972

Title: Advances in translational therapy for locally advanced gastric cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 06403881

**Position:** Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2023-01-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-02 12:26

Reviewer performed review: 2023-01-02 12:34

Review time: 1 Hour

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No creativity or innovation</li> </ul>



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Conclusion	<ul> <li>[ ] Accept (High priority)</li> <li>[ ] Accept (General priority)</li> <li>[ Y] Minor revision</li> <li>[ ] Major revision</li> <li>[ ] Rejection</li> </ul>
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

### SPECIFIC COMMENTS TO AUTHORS

in this review, the authors reviewed how to select suitable patients for translational therapy to prolong objective survival and improve survival quality. It is an interest review, but the manuscript seems to simple. It suggested that the authors includes more advanced and related therapy in the review.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 03768526

**Position:** Peer Reviewer

Academic degree: MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2023-01-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-02 03:44

Reviewer performed review: 2023-01-08 13:41

**Review time:** 6 Days and 9 Hours

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [Y] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	<ul> <li>[ ] Grade A: Excellent [ ] Grade B: Good [ Y] Grade C: Fair</li> <li>[ ] Grade D: No creativity or innovation</li> </ul>



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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [Y] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority)</li> <li>[ ] Accept (General priority)</li> <li>[ ] Minor revision</li> <li>[ Y] Major revision</li> <li>[ ] Rejection</li> </ul>
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

### SPECIFIC COMMENTS TO AUTHORS

Is the term 'translational therapy' correct? Generally, multimodality therapy or multidisciplinary treatment would be used. Translational medicine refers to an approach that directly connects the results of basic research to clinical treatment, so molecular targeted therapy would fall into this category, but radiotherapy and chemotherapy would not. This article should either stop using the term 'translational therapy' or rewrite it as a review to focus on basic research and clinical applications of molecular targeted drugs. Although gastrectomy is still the main treatment for resectable gastric cancer, there is still no agreement in clinical practice between East and West regarding the extent of lymph node dissection. The results of perioperative adjuvant therapy in Western countries are based only on D0-1, while the results of JCOG0501 are based on D2. The results of radiochemotherapy in the West are considered therapeutic effects on residual group 2 lymph node metastasis, and if D2 is possible, at least adjuvant radiotherapy is deemed unnecessary. Without introducing the current state of lymphadenectomy before introducing adjuvant therapy, this review would confuse the reader. Neoadjuvant therapy is preoperative adjuvant therapy for resectable gastric



cancer, whereas preoperative therapy for unresectable gastric cancer is induction chemotherapy or induction immunochemotherapy. The two must be strictly distinguished. Yoshida's proposal is for the latter. Neoadjuvant chemotherapy has been reported to be effective not only in improving life prognosis but also in preventing the recurrence rate in patients with infectious complications. It should be cited and discussed. Ramucirumab is widely used in clinical practice as a molecular targeted therapy for gastric cancer. The results of its clinical trials must be described. Similarly, the use of trastuzumab deruxtecan must be stated.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 06395430

**Position:** Peer Reviewer

Academic degree: DPhil, PhD

Professional title: Researcher, Senior Researcher

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2023-01-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-02 10:10

Reviewer performed review: 2023-01-08 20:13

Review time: 6 Days and 10 Hours

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	<ul> <li>[ ] Grade A: Excellent [ ] Grade B: Good [ Y] Grade C: Fair</li> <li>[ ] Grade D: No creativity or innovation</li> </ul>



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Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

### SPECIFIC COMMENTS TO AUTHORS

Reviewer Comments 1. Abstract of the manuscript is not strongly covered the significance? 2. Please try to add Figure to more clarity your work. 3. Relevant reviews: I feel that the relevant recent literature revisions are not fully accounted for in this review. The authors should list more carefully the other reviews on the same argument and refer to them for topics that are not explicitly treated in their paper. This would help the reader to get a clearer and more general landscape of the issue. 4. Please add new references in the introduction part. (1) Satyananda, V., Gupta, R., Hari, D. M., Yeh, J., & Chen, K. T. (2019). Advances in translational research and clinical care in pancreatic cancer: where are we headed?. Gastroenterology Research and Practice, 2019. (2) Kanaoujiya, R., Porwal, D., & Srivastava, S. (2022). Applications of nanomaterials for gastrointestinal tumors: A review. Frontiers in Medical Technology, 4, 997123,1-7. (3) Sah, B. K., Zhang, B., Zhang, H., Li, J., Yuan, F., Ma, T., ... & Zhu, Z. (2020). Neoadjuvant FLOT versus SOX phase II randomized clinical trial for patients with locally advanced gastric cancer. Nature communications, 11(1), 1-8. (4) Yeoh, K. G., & Tan, P. (2022). Mapping the genomic diaspora of gastric cancer. Nature Reviews Cancer, 22(2), 71-84. 5.



The authors should do the analysis the conclusion section must clearly establish a strong correlation with the proposed topic. 6. The objective or objectives should be clearly elucidated in the last paragraph of the introduction. 7. It is suggested to add one part on "challenges and opportunities" before conclusion part.



### **RE-REVIEW REPORT OF REVISED MANUSCRIPT**

**Name of journal:** *World Journal of Clinical Cases* 

Manuscript NO: 82972

Title: Advances in translational therapy for locally advanced gastric cancer

Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 03768526

**Position:** Peer Reviewer

Academic degree: MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2023-01-02

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2023-02-08 01:07

Reviewer performed review: 2023-02-14 06:41

**Review time:** 6 Days and 5 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	<ul> <li>[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing</li> <li>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</li> </ul>
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



### SPECIFIC COMMENTS TO AUTHORS

My comments are below.I think this revision is generally acceptable. Thank you very much. ---- My view is very different from yours. Translational therapy aims to use the knowledge gained from basic scientific research to develop new treatments and therapies for patients. The term "translational" refers to the translation or transfer of knowledge from the laboratory to the clinic. Again, the use of the word 'translational therapy' should be reconsidered. In other respects, however, the content is generally appropriate and can be accepted.