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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 58218

Title: Role of gut microbiome in regulating the effectiveness of metformin in reducing colorectal cancer in Type 2 diabetes

Reviewer's code: 00004010
Position: Peer Reviewer
Academic degree: PhD
Professional title: Professor
Reviewer's Country/Territory: United States
Author's Country/Territory: China

Manuscript submission date: 2020-07-13
Reviewer chosen by: Jia-Ping Yan
Reviewer accepted review: 2020-08-10 16:15
Reviewer performed review: 2020-08-17 15:58
Review time: 6 Days and 23 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Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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	[Y] Yes [ ] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

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SPECIFIC COMMENTS TO AUTHORS

You Huang et al; The Drug-Gut microbiota-Effect Axis: new mechanism for metformin to reduce the incidence of colorectal cancer in patients with type 2 diabetes mellitus The primary objective of this review article by You Huang et al is to provide a comprehensive review of the mechanism for metformin to reduce colorectal cancer in type 2 diabetes mellitus. This is certainly an interesting area of investigation, one that may be of interest to investigators pursuing studies on the role of gut microbiome in regulating the effectiveness of metformin in reducing colorectal cancer (CRC) in type 2 diabetes mellitus. Although the subject matter of this review is of significant clinical and therapeutic importance, the manuscript as submitted lacks in-depth analysis of the data summarized in the review article. It is imperative that changes in different gut microbiota by metformin at different stages of CRC are connected. This issue should be emphasized and described in more detail. It would be of interest if the authors summarize the information (if any) about the therapeutic effectiveness of metformin and changes in gut microbiome in recurrent CRC in type2 diabetic patients. These are important issues in view of the fact that nearly 50% of CRC patients eventually develop recurrent tumors, which are resistant to routine chemotherapy and thought to be due to enrichment of cancer stem cells. I am not quite sure what do the authors mean by "The Drug-Gut microbiota-Effect Axis". The authors may like to change the title to a more simple one such as " The Role of Gut microbiome in Regulating the Effectiveness of Metformin in Reducing Colorectal cancer in Type 2 Diabetes". There are several typos; " lastest" should be "latest" The review article needs to be edited for English.