

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3714

Title: Can serum CA 19-9 predict tumor staging and prognosis in gastric cancer?

Reviewer code: 02456592

Science editor: Gou, Su-Xin

Date sent for review: 2013-05-17 12:01

Date reviewed: 2013-05-27 11:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The authors have focused on the prognostic significance of high preoperative levels of CA 19-9 in patients with gastric cancer. The results indicate that measurements of preoperative serum CA 19-9 levels may be useful in the prediction of survival and prognoses in patients with gastric cancer, confirming its association with OS and DFS. The paper is well written, but in the journal of Asia Pac J Clin Oncol (2012 Nov 26), it has been showed that an elevated CA 19-9 concentration was significantly associated with shorter survival. The conclusion is similar to this paper's result. So, the author should explain the superiority compare to the previous study. Moreover, the sample is relatively small for the conclusions. The multi-center and prospective studies should be designed to certify the prognostic significance of CA 19-9.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3714

Title: Can serum CA 19-9 predict tumor staging and prognosis in gastric cancer?

Reviewer code: 01560081

Science editor: Gou, Su-Xin

Date sent for review: 2013-05-17 12:01

Date reviewed: 2013-05-29 21:56

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript described the survival outcome of gastric cancer from two aspects (OS and DFS) according to the preoperative CA 19-9 levels and other prognostic factors. Even though former researchers had reported the value of several serum tumor markers such as CEA, CA199, CA724 in predicting the prognoses of gastric cancer, the conclusions were inconsistent. Therefore, the viewpoint of this article is novel and interesting to most of the clinicians. But the manuscript still needs great improvements before acceptance. My comments are as follows: 1. The title needs to be more specific since the manuscript showed a significant statistical result of the relationship between preoperative CA199 and prognoses, but not the tumor staging. 2. In the materials and methods, the criteria of inclusion and exclusion of patients may need to be more detailed. For example, did the patients included take chemotherapy or other therapies before or after the surgery? Since such interferences are very important factors that influence the survival of people, it will be better if author could show those information in the baseline characteristics. In the section of initial work-up and follow-up, a beginning and ending time point of follow-up could be mentioned. 3. In the statistical analysis section, "DFS was calculated from the date of surgery until the date when those treated for gastric cancer were determined to be free of disease." were mentioned. Most of readers may be confused that how and when to judge a patient was free of disease. Therefore, an explanation or a definition is necessary. 4. In the result section, the author may show the numbers of the loss and the survival of patients, both of which will influence the censored value. While too many censored values may affect the use of Cox method and may cause the lack of median survival of DFS, finally impact the test performance. 5. The format of the references was not conformed to the requirement of the journal. The DOI of several articles were incorrect, like reference 5, 12, 14, 16, 20, 25. So the author



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needs to revise according to the "Instruction to authors". However, the manuscript is a still a well performed study and the results are of considerable interest. It will be better if it can be improved.