ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2153

Title: Colorectal Cancer in Patients Under 50 Years of Age

Reviewer code: 00860822

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:29

Date reviewed: 2013-02-01 23:12

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[ ] 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)		BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

This paper analyzed the data from patients with colorectal cancer from two US hospitals, and presented their findings that colorectal cancer in patients under 50 years of age is common and without family history. This is a valuable presentation from which we can see the incidence of colorectal cancer in young patients, it also alarm us it is time to change our conventional notion that age is a risk factor of this kind of cancer leading to omission of screening for young people <50 years. I have some minor questions for the authors: 1. They used "Cohort" at the beginning of the Methods section. Strictly, it is unsuitable for this paper. The authors of the manuscript merely present the incidence of colorectal cancer in young patients without any analyses upon the risk for such phenomenon, so in fact it just is an epidemiological presentation. Therefore, the title should be change to "The Incidence of Colorectal Cancer in Patients Under 50 Years of Age in US". 2. They analyzed patients from two hospitals, but their enrolling dates were not identical, one was "from 2006 to June 30, 2009", and another was "from July 1, 2009 to May 2012". Were there any influences of the difference of study periods on the incidence of cancer? The authors did not give any information of the difference between these two institutes. 3. The authors compared their patients data and subdivided them into four stages (1-4), but I cannot find any information about the definition of the so-called stages. Even they are familiar with the definition in their professional, but paper if published will not be read only by the readers in this field. So the readers need to understand the concept. 4. The same thing is that they did not give explanation like "BRBPR" in table 2. No one knows what that is. 5. The authors gave detailed information of surgical resection of the cancer, but it is difficult to get mortality data of these patients because they some of them were analyzed enrolled to the hospital in the near past year of 2012.

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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 2153
Title: Colorectal Cancer in Patients Under 50 Years of Age
Reviewer code: 00031835
Science editor: Song, Xiu-Xia
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[Y] 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	[Y] Minor revision
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COMMENTS TO AUTHORS

The authors of this manuscript have analysed two US institutions' records of patients <50 yrs old, who underwent colorectal cancer (CRC) surgery over a 16-year period. Their aim was to investigate several epidemiological characteristics of CRC, such as the volume of CRC operations for young patients, the proportion of patients with a family history of CRC, the stage at presentation, the cancer location, and the presenting symptoms.   Please find below a few comments aiming to clarify some points: (1) Manuscript title: The authors could change the title of the manuscript to more accurately reflect the identity of their study. For example, the title could change to: "Colorectal cancer in patients under 50 years of age: A retrospective analysis of two institutions' experience".   (2) Page 2, Abstract, Aim: Please change "incidence" to "epidemiological characteristics".   (3) Page 5, Materials and Methods, first sentence: The patients included in this analysis do not constitute a typical cohort. I suggest that the phrase "retrospective cohort" should be deleted. So, the first sentence of p. 5 should read "Hospital records of patients under 50...".

ESPS Peer-review Report
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ESPS Manuscript NO: 2153
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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	[ ] High priority for publication
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COMMENTS TO AUTHORS

Myers et al. conducted an interesting epidemiological study on colorectal cancer in patients under 50 years of age. The examined cohort is adequate and the study is well conducted and presented. However, the authors do not use statistical analyses as widely as they could. For example, they show a significantly higher proportion of high stage tumors between "young" and "old" patients, but do not analyze if the other shown distributions (e.g. tumor location) are significantly different between groups. So, the authors should add more statistical analyses on presented data, since the paper is too descriptive in the current form. Minor point: please explain the acronyms in legend to tables.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2153

Title: Colorectal Cancer in Patients Under 50 Years of Age

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
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COMMENTS TO AUTHORS

I think that to have more information regarding biological aspect i.e. angiolinfatic invasion, k-ras would provide some information about the prognostic and predictive factors to therapy response.