

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8320

Title: Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer

Reviewer code: 00069105

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-26 09:12

Date reviewed: 2013-12-28 17:48

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	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Dear Sirs: Interesting paper but there are some weak points that should be improved (measurement of bilirubin and results section). Abstract: The cite about table 2 should be erased Introduction is OK Methods are Ok but some information about surgical items should be interesting Results: too short and there are unanswered questions. As you know bilirubin levels affected the level of CA19-9 so it is crucial to know the levels of bilirubin for univariate and multivariate analysis. Moreover you have 80 pancreatic cancer but 60 are in the head and 20 in body so the influence of jaundice would not be homogeneous. I think that mixing head and tail cancer is not a good idea because the resection rate, survival and prognosis are not the same. Perhaps focusing in 61 head cancers is nicer. I understand that the paper is devoted to PET and CA19-9 but some surgical information is needed. How many patients were operated on?? all of them? I suppose that all patients are operated because you talked about R margin in 80 cases. So why you have node status in 59??? R0 margin and node status are independent factors so I personally do not understand this point. Which is your histology protocol (leeds,..) 25% of R1 could be normal or high depending the protocol you performed. Discussion is OK but some points should be remarked. This section should be improved to understand data Tables: Table 1: include percentages Some interesting data in tables are not commented in discussion. For example the low SUV in undifferentiated cancer near to 0. I personally found this data very interesting. References: are OK but in the text should be changes by numbers

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Title: Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer

Reviewer code: 00068107

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-26 09:12

Date reviewed: 2014-01-04 16:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

No

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8320

Title: Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer

Reviewer code: 02445548

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-26 09:12

Date reviewed: 2014-01-06 13:45

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 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 checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The topic of exploring the relevance of SUVmax and Ca 19-9 in the prediction of prognosis and overall survival in pancreatic cancer is interesting. However, it is clearly seen that on multivariate analysis, the only factor that was significant is the tumour stage and not the two mentioned variables. Hence, there does not seem to be a basis for the authors conclusion that SUVmax and Ca 19-9 are the most significant variable in predicting survival, even if the graphs show that there is a level of correlation of these variables with the survival of the patient. In addition, no cut-off level for the SUV max nor the the Ca19-9 was used to suggest a clinically useful parameter for usage. If all that has been established is that the SUVmax and Ca19-9 correlate with survival somewhat but are not significant on the multivariate analysis, these variables may just reflect correlation with a higher T stage, which is the only factor that is significant for overall survival.

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8320

Title: Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer

Reviewer code: 00011431

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-26 09:12

Date reviewed: 2014-01-06 15:03

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	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The ms "Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer" by Zhao et al. reported that pretreatment SUVmax and serum CA19-9 were associated with R0 surgical resection of pancreatic cancer, and higher levels of SUVmax or serum CA19-9 indicated poor prognosis of pancreatic cancer. Although these findings are not very novel, it is noted that most papers regarding this issue were from western countries. In this study, the authors analyzed the data from 80 Chinese pancreatic cancer patients with the follow-up time of 7-35 months. Their results provided some useful information for the diagnosis and prognosis of pancreatic cancer. 1. Since the prognostic value of SUVmax and serum CA19-9 in pancreatic cancer has already been reported before, the emphasis of this article may be put on the combination of these two parameters. Thus, in fig.1c, it is better to show the survival time of the patients in the following 4 groups: SUVmax high/CA19-9 high, SUVmax high/CA19-9 low, SUVmax low/CA19-9 high, and SUVmax low/CA19-9 low. Corresponding changes need to be added in Results and Discussion parts. 2. Table 2 has contained all the information present in Table1. Thus Table 1 is unnecessary. 3. The discussion is basically a repeat of the results. The authors need to rewrite the discussion by adding more analytic points. 4. The format of the ms, as well as the English language, needs deep editing.

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Title: Prognostic significance of SUVmax (maximum standardized uptake value) and serum carbohydrate antigen 19-9 level (CA19-9) in patients with pancreatic cancer

Reviewer code: 00183279

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-26 09:12

Date reviewed: 2014-01-09 22:52

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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
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COMMENTS TO AUTHORS

As regarding FDG uptake, many studies have concluded that higher SUVmax of primary pancreatic tumor is associated with poor progression free survival and pretreatment SUVmax is an independent prognostic factor for predicting survival in patients with locally advanced or metastatic pancreatic cancer. However, pretreatment SUVmax is not associated with chemotherapeutic response. CA19-9 is also linked with a higher tumor burden and is implicated to be a significant risk factor associated with overall survival. However your study needs raises some questions and arguments which needs to be addressed upon; The language is too colloquial with lot of grammatical errors. What was the protocol used for FDG screening and was uptake reading corrected for serum glucose. How many of yours patients were diabetics? Was post-surgical FDG performed? It would have confirmed that SUVmax after surgery has an association with staging/survival if at all present. CA19-9 values were collected preoperatively and were post-operative values graduated to the post-surgery scanning, if at all done. Your study was a retrospective one, then how was consent obtained from patients, in regards your study? In statistical analysis you have shown that the number of patients with lymph nodal disease were 34/25 totaling 59, what about rest of patients. You have stated that inclusion criteria for your study "lymphnode metastasis were confirmed by surgical pathology" how did these affected your inclusion criteria. Pictographs of FDG-CT need to be added with relevant details in corresponding index cases.