

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7767

Title: DE-ESCALATING TREATMENT IN GASTRIC AGGRESSIVE LYMPHOMA

Reviewer code: 02258108

Science editor: Wen, Ling-Ling

Date sent for review: 2013-12-02 10:42

Date reviewed: 2013-12-10 10:42

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

COMMENTS TO AUTHORS

The majority of references in the article are earlier articles. The content of the article is not new. In this article, the basic point of treatment of gastric aggressive lymphoma is common sense, and some similar articles have been published in recent years. 1. Compared with the word "DE-ESCALATING TREATMENT", people are more accustomed to using the word "DE-ESCALATING THERAPY". 2. Part of the references format is not standard, reference 17 and reference 19 are the same. 3. Needs some language corrections.

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Title: DE-ESCALATING TREATMENT IN GASTRIC AGGRESSIVE LYMPHOMA

Reviewer code: 00573538

Science editor: Wen, Ling-Ling

Date sent for review: 2013-12-02 10:42

Date reviewed: 2013-12-15 08:57

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 checked="" 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 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

Journal: World Journal of Gastroenterology Manuscript Number: ESPS Manuscript NO: 7767 Title: DE-ESCALATING TREATMENT IN GASTRIC AGGRESSIVE LYMPHOMA Article Type: Review article Referee Report Comments for authors Major comments: In this review, the authors review and compare several therapies used for the treatment of primary gastric DLBCL and suggest that H. pylori-eradicating antibiotic therapy is better than other therapies with a complete remission rate of 60-70% and a 5-year OS of 93%. Their review indicates that although different therapies have different indications, H. pylori-eradication is the first-line treatment for patients with primary gastric DLBCL associated with this bacterial infection. Although this review paper was well written and is of great interest, this reviewer has reservations as follows: Recently accumulating evidence indicates the association between infection/inflammation and tumors. What is the role of H. pylori infection in the pathogenesis of primary gastric DLBCL? The authors should give the rationale for H. pylori eradication in the treatment of primary gastric DLBCL. Minor comments: 1) The authors need to add a conclusion section to the paper summarizing the current therapies available for DLBCL and giving perspective remarks on the development of future therapy for patients with primary gastric DLBCL. 2) Some sentences in the manuscript are confusion. e.g. The last sentence of the paper: "The investigation of prognostic role of" on page 7; "Moreover, this trial has demonstrated that patients who do not response to....." on page 6. "response" should be changed to "respond" in the sentence. The authors need to carefully edit this submission before the paper could be published in an English-language journal. 3) Define the abbreviations when they are first used in the paper, e.g. the Summary section. 4) The authors need to learn how to prepare a manuscript in general. For instance, (i) type the manuscript with double space for all pages and (ii) number all the pages in the manuscript.