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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6890

Title: FOLFOX/FOLFIRI pharmacogenetics: the call for a personalized approach in colorectal cancer therapy

Reviewer code: 02570300

Science editor: Qi, Yuan

Date sent for review: 2013-10-31 18:16

Date reviewed: 2013-11-17 03:04

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

COMMENTS TO AUTHORS

The manuscript by Mohelnikova-Duchonova et al. focuses on the interesting and timely subject of pharmacogenetics in colorectal cancer chemotherapy. The review provides an update on the current research on estimating the efficacy FOLFOX and FOLFIRI chemotherapy regimens by genetic approach. The manuscript is written in good english language and concise. The storyline is easy to follow and the tables compliment them manuscript summarizing the text clearly. One minor point. The introduction section should be shortened by at least one page, because the introduction should generally introduce the reader to the subject, not for example exhaustively compare the efficacy and toxicity between the different regimens. These matters should be discussed in the other sections of the article.



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Title: FOLFOX/FOLFIRI pharmacogenetics: the call for a personalized approach in colorectal cancer therapy

Reviewer code: 02744124

Science editor: Qi, Yuan

Date sent for review: 2013-10-31 18:16

Date reviewed: 2013-11-20 22:09

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, RECOMMENDATION, CONCLUSION. It contains criteria for manuscript grading and search results for Google and BPG.

COMMENTS TO AUTHORS

I appreciate the opportunity to review this manuscript. An important consideration is choice of words. There is a lot of proofreading that needs to be done on this manuscript. Sentences are correct but are technically very choppy and it makes this a difficult manuscript to read. Periodically, references appear incorrectly in the text (ie: Schmidt et al on p8) or regimens are spelled wrong (FALFOX on p23). Also, the authors slip into the first person voice at times. I emphasize this grammatical lack of clarity because there is a heavy degree of technical, scientific writing, which I suspect many readers will be unfamiliar with. If this dense material is further hindered by a vernacular that is difficult to navigate, then the readers will be lost. Some comments: - Careful with facts. In the abstract, it implies Oxaliplatin has single agent utility, but it does not. - Need to justify the statement that "there are limited sensitivity of CRC to cytotoxic agents". Compared to Breast Cancer, sure, but this is true of most cancers. Many cancers have far less drug sensitivities than CRC. This doesn't make sense. But across all cancers, the ability to personalize therapy is emerging and makes for a solid introductory platform for this manuscript. - There is no need to summarize the mechanism of action of 5-FU, oxaliplatin, or irinotecan to this degree of detail. Anyone who would seek out this manuscript would be familiar with this, and these summaries distract from the primary study points. - When reviewing the results for trials on biomarkers, it would be useful to comment on whether the methods reviewed could be employed in a routine clinical setting or, if not, what barriers might be. - I find the summary of "studies going forward" very useful for this type of paper