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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8122

Title: Prognostic nutritional index predicts postoperative complications and long-term outcomes of gastric cancer patients with total gastrectomy

Reviewer code: 02551548

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-16 19:09

Date reviewed: 2014-01-08 23:13

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
<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 authors present a study that shows that the nutritional index is a simple and good prognostic marker for patients who underwent gastric resection for cancer in a curative intention. They included 386 patients in a study period from 2003 to 2008 with a follow-up until 2013. Although it is a retrospective study the results of the investigation are very interesting and show that nutritional status is indeed very important for the surgical outcome. A few questions arise, however, 1. 386 patients have been included and a follow-up of 100% is given in the results. In fact we do not know how many patients in total have been operated in a curative intention but died or were unable to be contacted, since it is stated that patients who died or were lost of follow-up after the operation procedure were excluded from the study. The authors should give the total number of patients who were operated and give numbers of those who were excluded from the study 2. During the time period of the study there might have been a difference in preoperative immunonutrition and feeding of the patients that leads to a different PNI at the time of the operation. The authors should comment on preoperative immunonutrition of the two study groups and discuss the impact in the discussion section.



ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8122

Title: Prognostic nutritional index predicts postoperative complications and long-term outcomes of gastric cancer patients with total gastrectomy

Reviewer code: 01438559

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-16 19:09

Date reviewed: 2014-01-16 12:29

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, RECOMMENDATION, CONCLUSION. It lists various grades (A-E) and corresponding actions like 'Accept', 'High priority for publication', 'Rejection', 'Minor revision', and 'Major revision'.

COMMENTS TO AUTHORS

I enjoyed reading this article of a study to evaluate the predictive value of prognostic nutritional index related to postoperative complications and long-term outcomes of gastric cancer patients who underwent total gastrectomy. I have several questions and comments regarding this article. 1. In the abstract methods, detailed description of statistical analysis is not needed. However, data that were used for analysis should be mentioned in the method. In addition, in the abstract results, patient number in PNI-high and low group, data suggesting the incidence of postoperative complications, overall survival should be included. 2. In the Introduction, please change the paragraph according to different subjects. 3. In the exclusion criteria; why did the authors excluded patients who died during the initial hospital stay or within 1 month after surgery? Since this study looks at the incidence of postoperative complications, postoperative morbidity and mortality may be underestimated. Likewise, patients who were lost to follow-up should be included to assess the incidence of early phase post-operative complication. 4. In the methods, the definition of postoperative complications used in this study should be explained. 5. How was the follow-up done? Explanation of "a standardized protocol" is needed. 6. Page6, 2nd line "There were no patients lost to follow-up..." is without saying since it is the exclusion criteria. 7. The median followup and range should be mentioned. 8. Was there any difference in the hospitalized period between the PNI high and low group? 9. In the discussion, page10, last sentence "These results suggest that a low PNI effects..." may not be concluded from this study. Whether low PNI was induced by the progress of tumor, or tumor progression induced malnutrition cannot be figured out. 10. The discussion paragraph is quite



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long. Please change paragraph according to the topic. 11. English polishing is needed.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8122

Title: Prognostic nutritional index predicts postoperative complications and long-term outcomes of gastric cancer patients with total gastrectomy

Reviewer code: 00070823

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-16 19:09

Date reviewed: 2014-02-09 23:04

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 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	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 authors proposed a practical variable for clinical prediction the prognosis of gastric cancer patients after curative resection. The idea of this study is perfect and language writing is good. The statistical method of this study is correct. I think this paper can draw the attention of readers if paper can be accepted.



ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8122

Title: Prognostic nutritional index predicts postoperative complications and long-term outcomes of gastric cancer patients with total gastrectomy

Reviewer code: 00227386

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-16 19:09

Date reviewed: 2014-02-13 02:01

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, RECOMMENDATION, CONCLUSION. It lists various grades (A-E) and corresponding actions like 'Accept', 'High priority for publication', 'Rejection', 'Minor revision', and 'Major revision'.

COMMENTS TO AUTHORS

Comments to Editor The authors are to be congratulated on this exhaustive study of the value of the Prognostic Nutritional Index in the prediction of post-operative complications and overall survival following total gastrectomy for stomach cancer. The following corrections or amendments are suggested:- 1 On page 5 it is stated that 6 patients were lost to follow-up but on page 6 it is stated that no patients were lost to follow-up. 2 On page 5, lines 5/6, it would be clearer if it read- (2) "patients who underwent no node dissection DO", and- (3) "patients who had metastases in the para-aortic lymph nodes". 3 On page10, line 14/15 it should read " decreased oral intake as a result of the cancer" and not "of total gastrectomy", because the PNI is based only on preoperative and not postoperative findings. The Tables are long and not easy to follow and could well be omitted because, with a little modification, all the information is given in the text. The only change in the text that would be needed would be to detail the " factors" in line 18 on page 7. Instead of "are presented that all factors" one could read" analysis of postoperative survival showed that tumour size and location, BMI, bleeding, histology and nodal metastases were associated with postoperative survival but not age, gender---" The Figures are good. In Figure 1 the caption needs changing to "OS curves for patients with all TNM stages between ---", and it is not clear what is meant by "censored". This needs explaining. In Figures 2 and 3 what is the significance of the + signs? Overall the English is good and clear, but there are places where the English idiom needs checking and the definite article "the" needs to be added.