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Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9661

Title: MULTIDISCIPLINARY TREATMENT OF RECTAL CANCER IN 2014: WHERE ARE WE GOING ?

Reviewer code: 02512347

Science editor: Qi, Yuan

Date sent for review: 2014-02-23 18:07

Date reviewed: 2014-02-27 12:47

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

COMMENTS TO AUTHORS

I have the following comments: ? The article is timely and nicely-written except for several grammar and typographical mistakes which need to be corrected. For examples: “will not beneficiate , MERCURY study GROUP, invariable malignant, MERCURY study GROUP, muscolaris propria, the complementarity, downstaging response, the Stockholm III trial , could underwent delayed, and in a overall survival, may be not benefit, alone is indicate in, extramesorectal lymph-adenopathy, the significative response, etc.” ? Under PET-CT scan: rephrase this sentence for clarity as it is unclear and confusing: “Moreover , the above -mentioned limitations in the spatial resolution of PET (4-6 mm), which enables the research of lymph-nodes less than 5 mm, poses the accuracy of FDG-PET-CT in the evaluation of lymph-nodes similar to the one of MRI with a reported sensitivity of 72 % [35-36].” ? Moreover, I would have liked you to include in this review: 1. An elaborated account on updates on the impact of chemoradiation in reducing the rate of abdominoperineal resection of low rectal cancers and increasing the rate of sphincter-sparing resections. Also in rendering non-resectable rectal cancer feasible for resection. 2. The routine vs. selective defunctioning stoma formation in case of low rectal cancer and irradiated pelvis. 3. A brief account on pelvic exenteration in locally advanced rectal cancer after chemoradiation.



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 9661

Title: MULTIDISCIPLINARY TREATMENT OF RECTAL CANCER IN 2014: WHERE ARE WE GOING ?

Reviewer code: 02446471

Science editor: Qi, Yuan

Date sent for review: 2014-02-23 18:07

Date reviewed: 2014-03-07 03:44

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)		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

A comprehensive review on rectal cancer imaging and pre-operation staging. It would help the readers to understand the review if the authors includes a table summarizing the pros and cons of each imaging systems.