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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6865

Title: PROBLEMS FACED BY EVIDENCE-BASED MEDICINE IN GASTRIC CANCER SURGERY

Reviewer code: 00029319

Science editor: Qi, Yuan

Date sent for review: 2013-10-30 19:32

Date reviewed: 2013-11-12 00:08

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 performed a review of literature and national guidelines for gastric cancer management particularly with regard to extension of lymphadenectomy. They discuss the fact that even if D2 lymphadenectomy is the standard of surgical treatment with curative intent in most European guidelines for gastric cancer evidence based-medicine is lagging behind. They conclude EBM should value to a larger extent Eastern Asian literature to eliminate this lag. The authors address an important issue with their review. But overall, what is new? In the last two years there already are many published reviews that address the importance of lymphadenectomy in gastric cancer and the lag of EBM (i.e. Schmidt et al., 2012 . J Surg Oncol; Brar et al., J Am Coll Surg 2013; de Steur et al., Dig Surg 2013). To eliminate the lag of EBM we should not only value to a larger extent Eastern Asian literature but perform our own randomized controlled studies in specialized high volume centers and with experienced surgeons. Therefore, I would recommend to not accept this paper for publication.



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6865

Title: PROBLEMS FACED BY EVIDENCE-BASED MEDICINE IN GASTRIC CANCER SURGERY

Reviewer code: 02445447

Science editor: Qi, Yuan

Date sent for review: 2013-10-30 19:32

Date reviewed: 2013-11-19 14:50

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 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 manuscript deals with an actual topic of modern surgical oncology. The huge amount of scientific publications worldwide obviously necessitates a more critical appraisal of the research and publication activity that represents the true essence of evidence-based medicine. The authors attempted to apply a very specific methodology including scientometrics and webometrics, on the one hand, and social epidemiology, on the other hand, in terms of a preliminarily defined narrow-profile field of applied surgical oncology. However, they remain far from the scientific foundations of applied quantitative-qualitative research. Let us point out some crucial disadvantages of the manuscript only. The title is promising and, in the same time, of general nature although the main emphasis is put on a specific surgical procedure, i.e. the attitude to extended and limited lymphadenectomy in different regions of the world, defined as Eastern Asia (illustrated by two countries such as Japan and South Korea only) and some countries in the Western world such as the USA, European Union, some member states, etc. Let us give a single example of incorrect quotation to a foreign publication: On page 4, lines 11-12 from below, the authors state that Indeed the Western surgical approach to advanced gastric cancer was supported by Evidence-Based Medicine, in particular by a Cochrane review published in 2005[6], while P. McCulloch et al. (2005) mentioned that Medline, Embase, the Cochrane register and other databases were searched for studies reporting node dissection technique, 5 year survival and mortality after gastrectomy. In fact, this specific Cochrane review was not included in the reference list. A lot of more recent pertinent publications, even by Italian authors, are omitted, too. There are no standardized epidemiological data in the manuscript. Data from 2008 should be actualized. There is no new scientific information in authors' statement that gastric cancer is much more common in Eastern Asia than in Europe and in



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the USA. The explanations of the better expertise of the representatives of oncologic surgery in Eastern Asia does not sound convincingly enough and should be well-grounded by a much more comprehensive set of objective measurements. The attempts to provide scientometric argumentations (e.g. on page 4, lines 12-15 from below) failed. As a whole, the manuscript represents an essay rather than a conventional original paper. There is no well-grounded and clearly described research methodology at all. Single-year and cumulative impact factors are listed in Journal Citation Reports (this term is omitted). On page 7, line 9 from below, the authors declare that "We searched the Web of Science for papers using the phrase "surgical trial" since 2008". This sounds far from scientific terminology. It is not allowed to include the publication year "2013" (see Figure 2), as into every database, the primarily published scientific documents are embedded with a certain delay, i. e. the number of papers published in 2013 and indexed until October 2013 (the manuscript was submitted on October 29, 2013) is smaller than that of the papers which will be indexed by the end of 2014, etc. Web of Science should not be used alone for such ambitious analyses. For instance, the authors should carefully read the following paper published by authors from Greece and Germany already in 1995 prior to claim the more insufficient experience of European surgeons in comparison with that of their colleagues in Eastern Asia: Roukos D, Schmidt-Mathiesen A, Encke A. Adenocarcinoma of the gastric antrum: does D2 total gastrectomy with splenectomy improve prognosis compared to D1 subtotal gastrectomy? A long-term survival analysis with emphasis on Lauren classification.- Surgical Oncology, vol. 4, 1995, No 6, 323-332. There is no sufficient explanation of the results illustrated in the tables and figures. There is no conclusion at all. Among the



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6865

Title: PROBLEMS FACED BY EVIDENCE-BASED MEDICINE IN GASTRIC CANCER SURGERY

Reviewer code: 02841708

Science editor: Qi, Yuan

Date sent for review: 2013-10-30 19:32

Date reviewed: 2014-02-08 15:28

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	<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

In the review, authors recommended literature from different countries to seek reasonable operation mode for gastric cancer. There is significance of this paper to guide clinical treatment for patients with gastric cancer. However, I consider that the title "Problems faced by Evidence-Based Medicine in gastric cancer surgery" is not appropriate, for there are many problems in gastric cancer surgery, and the authors only compared 2 kinds of operation mode(D1 and D2) in this review. I suggest authors to revise it.



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6865

Title: PROBLEMS FACED BY EVIDENCE-BASED MEDICINE IN GASTRIC CANCER SURGERY

Reviewer code: 00724709

Science editor: Qi, Yuan

Date sent for review: 2013-10-30 19:32

Date reviewed: 2014-02-10 10:42

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

COMMENTS TO AUTHORS

In this manuscript, the authors reviewed the problems of EBM in gastric cancer surgery. The contents were interesting as to gastric cancer surgery including comparison of extension of lymphadenectomy. However, the style of description was not suitable to 'review style'. The authors should correctly show the search methods including key words, and source of data bases, especially in the former parts. Minor revises 1. Conclusion part was so long. The authors should describe concisely. 2. Fig. 1 was not needed.