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315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

## ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 8261

**Title:** Therapeutic Approaches to Gastric Cancer: A 2014 Update

**Reviewer code:** 02543990

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-22 23:10

**Date reviewed:** 2013-12-28 08:44

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)	<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

Gastric cancer is a leading cause of cancer death worldwide, advances in improving the outcome of this deadly disease depend on the development of effective early detection and novel therapeutic strategies. This review written by Elimova and colleagues, who have comprehensively discussed the latest results of clinical trials for the treatment of early and advanced stage of gastric cancer and the challenges faced to develop and use targeted therapies. According the clinical trial results, general treatment for different setting and future research directions are also discussed. Overall, this timely review is well-written, well-balanced, and of broad interest to the research field of gastric cancer.

The submission may be further improved by some minor modifications of its organization and inclusion of some recent interesting findings. Here are my suggestions:

1. As indicated by the title "... A 2014 Update", the updated gastric cancer information available (2013) is suggested to be cited to replace the reference 2.
2. The content in section of "Pathogenesis" does not match the title; it is suggested to use the title of "Risk factors of gastric cancer". In addition, a number of studies showed that polymorphisms in inflammatory genes associated with risk of gastric cancer, authors did not mention it.
3. Page 4, for consistence and avoiding confusion, E-caherin-1 should be noted as encoded by the CDH1 gene.
4. In the section of "Prevention", quite old references were cited while missing some important new findings. For example, a long-term follow-up study of randomized clinical trial carried out in Shandong, China—an area where rates of gastric cancer are very high—found that short-term treatment with antibiotics to eradicate H. pylori reduced the incidence of gastric cancer by almost 40 percent (PMID:22271764). In addition, the reference 16 was an incomplected citation, because this



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study also found that ‘in the subgroup of HP carries without precancerous lesions, eradication of HP significantly decreased the development of gastric cancer”. Therefore, it is suggested to rewrite this part and reword the last conclusion sentence.



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**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 8261

**Title:** Therapeutic Approaches to Gastric Cancer: A 2014 Update

**Reviewer code:** 00744476

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-22 23:10

**Date reviewed:** 2013-12-29 03:21

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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" 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

This paper is a review article about recent chemotherapy for gastric cancer including perioperative setting. Therefore, the title of this article is not a little consistent with contents. This review article including the latest data would be interesting and helpful for gastrointestinal oncologic field, however, there are a lot of mistakes including reference in this paper. These many serious mistakes would lead to reduce confidence of this article. Therefore, authors should look it over again more carefully, and also have to confirm and amend whether describing results are come from the exact citing reference.

- As I mentioned above, there are a lot of mistakes about references. Although I show some examples below, you should confirm all the data and references again more carefully and amend more except for those. Ex) Page 9, 4th line, Page 10, 1st line: Ref (26) is not paper for INT0116. Page 11, 10th line: Ref(30) is not update-results of ACTS-GC. Page 12, 10th line: Ref (31) is not meta-analysis of adjuvant chemotherapy. 2nd paragraph in page 19: Ref (44) should be added after (43) in the 2nd line and be removed from 6th line. Page 24: Ref (52) is not Japanese study. Ref (44) would be equal to (55), and (42) and (56), too...
- Please show the reference number on each trial of Table 1 and 2.
- Table 1: Please show the degree of lymph node dissection and stage in each trial. Abbreviation of "NR" should be show.
- Table 2: What is "183" in the 2nd line of Table legend?
- Description of "early stage" in abstract and some places is not inappropriate. Early stage is equivalent to localized cancer. Early stage means T1a cancer especially for Asian gastroenterologist.
- Page5, 11-12th line, Please mention about methodological issue in detail.
- Although authors wrote "Table 1 depicts the staging system....." in "Treatment of Early Stage Disease" in page 5, no data in Table 1. What happen?
- Page 16, 15th line, I think that the reason is not limited to the difference of tumor biology. Difference of the rate of patients who received more



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than 2nd line would also affect on this discrepancy. 9. Study by Kang et al (shown in Table 2) should be also discussed in "Second Line Therapy" section. 10. "Chemotherapeutic" is more suitable for this title compared to "Therapeutic" because authors do not mention for endoscopic and surgical therapy. 11. Abstract, Page22: Authors should correct from "Ramucurumab" to "Ramucirumab".



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## ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 8261

**Title:** Therapeutic Approaches to Gastric Cancer: A 2014 Update

**Reviewer code:** 02536443

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-22 23:10

**Date reviewed:** 2013-12-30 10:21

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

This manuscript deals with a thorough review of recent development in the treatment of gastric cancer, and it will serve as guidelines for the physicians engaging in the treatment of gastric cancer. It should be accepted for WJG after minor revision in terms of following issues:

1. There are several grammatical and topographical errors: please check sentences and spelling.
2. Page 5, lines 1-3 from the bottom, there is a statement ' Table 1 depicts the staging system of UICC and AJC', but given table does not show TNM staging system. Reviewer feels no need of showing well-known TNM staging system, and the statement above should rather be removed.
3. Page 16, Line 6: reference 31 is not related to bevacizumab, but to ramucirumab.
4. Page 19, line 10 from the bottom, reference 44 should be added after 43, or both deleted. Same page, line 6: reference 44 should be deleted.
5. Page 22, line 4 from the bottom: T1bN) → T1bN1?
6. Page 29, Table 1, bottom of the third column: please check the description.
7. Page 29, Table 1, heading of the fourth column is not correct: HR for overall survival or death.
8. Table 2, the second cell of the fourth column: 1.47(TTP, <0.001), 1.29(OS, 0.02)



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### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 8261

**Title:** Therapeutic Approaches to Gastric Cancer: A 2014 Update

**Reviewer code:** 02823548

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-22 23:10

**Date reviewed:** 2014-01-07 20:59

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

### COMMENTS TO AUTHORS

The submitted manuscript presents a review about therapeutic approaches to gastric cancer. However, there are several points to be considered for correction. 1. How about correcting the title of the manuscript, for example, 'Update of medical treatment for gastric cancer' when considering the contents of the manuscript? 2. How about deleting the part of 'pathogenesis' and 'prevention' or add the contents? For example, in the pathogenesis, short description of different pathogenesis between intestinal and diffuse type gastric cancer or between distal and proximal gastric cancer. Some corrections are also necessary, for example, the representative indications of H. pylori eradication are peptic ulcer disease, MALToma, and EGC after endoscopic resection. 3. You had better change the term of "early stage" into "localized" in the manuscript, because early stage in your article is not confined to real early stage based on TNM staging. And, 'advanced disease' had better be changed into 'metastatic diseases', that is, "treatment of metastatic disease" (not, advanced disease). 4. Please ascertain the reference [31] in the page 12 (A meta-analysis based on single patient-data from 3,838 patients and 17 randomized controlled trials showed a 7% improvement in overall survival (hazard ratio [HR], 0.82; 95% confidence interval [CI], 0.76-0.90; P < .001) for fluorouracil-based postoperative chemotherapy when compared with surgery alone. [31]).