

ESPS Peer-review Report**Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 6886**Title:** Adjuvant therapy for Gastric Cancer: Current and Future Directions**Reviewer code:** 02446029**Science editor:** Yuan Qi**Date sent for review:** 2013-10-31 17:47**Date reviewed:** 2013-11-15 21:44

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 checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" 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

This is a review article of gastric cancer describing past studies and current trends. The manuscript suffers from a cursory review of the literature and a focus on only two current protocols with very large number of references and relatively little text. Specific Comments: Abstract: The abstract should include references to the current situation with respect to survival, local recurrence, distant metastasis, and analysis of failure. It should reference the most common protocols currently in use. Introduction: The introduction section does not take into account the vast majority of current protocols in the United States and Europe, and other countries. There is no section on diagnostic dilemmas with respect to difference between H-Pylori induced gastric cancers, gastric lymphoma, gastric sarcomas, and other confounding diagnoses. The section on chemotherapy and pre-operative chemoradiotherapy is incomplete and does not reference the current protocols. The section on ongoing trials list very few, focusing on those in Japan and Korea rather than the United States and Europe. This section can be greatly enhanced. The figures and tables are selective and a complete comprehensive review should be included. Figures 2 and 3 with representative protocols are not the most prominent ones in use, and the entire manuscript should be rewritten with a focus on current literature. Thanks.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6886

Title: Adjuvant therapy for Gastric Cancer: Current and Future Directions

Reviewer code: 01981051

Science editor: Yuan Qi

Date sent for review: 2013-10-31 17:47

Date reviewed: 2013-12-02 07:56

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

COMMENTS TO AUTHORS

This article reviewed the current status and future directions on adjuvant treatment of gastric cancer based on available evidences. The comprehensive review presented some helpful hints on future directions of clinical study, especially the role of radiation to be incorporated into the current therapeutic model. I think it is quite helpful for the reader to get a comprehensive and suggestive view on this interesting topic. Spelling errors and some typing errors have to be corrected before publication

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6886

Title: Adjuvant therapy for Gastric Cancer: Current and Future Directions

Reviewer code: 00504187

Science editor: Yuan Qi

Date sent for review: 2013-10-31 17:47

Date reviewed: 2014-06-08 22:50

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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	<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

This review about adjuvant therapy for gastric cancer is up-to-date, well written and I could not find anything particularly meaningful to add. It was quite helpful for me to read it. It gives a comprehensive view of this not yet clear-cut issue, especially for those who are not deeply involved in this topic. The references are up-to-date and cover a wide range of years, from the first reports to the latest published papers. I would recommend accepting the manuscript.

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6886

Title: Adjuvant therapy for Gastric Cancer: Current and Future Directions

Reviewer code: 00537853

Science editor: Yuan Qi

Date sent for review: 2013-10-31 17:47

Date reviewed: 2014-06-16 19:08

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 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 aim of this review is to focus on current standard of adjuvant therapy in gastric adenocarcinoma, with special reference to recent and ongoing trials. The manuscript, although not very original, is rather interesting and well written. I have some remarks: Introduction - Some references about the clinical applicability and prognostic value of new TNM staging system may be useful "East versus West" approach to Gastric Cancers - An interesting recent study on this topic could be cited (Shim JH et al. Is gastric cancer different in Korea and the United States? Impact of tumor location on prognosis. Ann Surg Oncol. 2014;21:2332-9) Extent of Lymph Node Dissection - In the recent Japanese Research Society for Gastric Cancer guidelines, lymph node station # 7 (left gastric artery) is included in the D1 lymphadenectomy. Please correct Future Directions / Ongoing Trials - Expanding this section could be very useful to the readers Spelling: - "bevacizumab" pag. 14.