



## BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, United States

Telephone: +1-925-223-8242 Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com <http://www.wjgnet.com>

### ESPS Peer-review Report

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

**ESPS Manuscript NO:** 9172

**Title:** The Accuracy of early detection of colorectal tumours by stool methylation markers: A Meta-Analysis

**Reviewer code:** 00214267

**Science editor:** Na Ma

**Date sent for review:** 2014-01-25 09:07

**Date reviewed:** 2014-03-10 20:27

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

Well written meta-analysis on the Accuracy of early detection of colorectal tumours by stool methylation markers. The authors need to update the literature search by Jan, 2014.

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

**ESPS Manuscript NO:** 9172

**Title:** The Accuracy of early detection of colorectal tumours by stool methylation markers: A Meta-Analysis

**Reviewer code:** 01330502

**Science editor:** Na Ma

**Date sent for review:** 2014-01-25 09:07

**Date reviewed:** 2014-04-02 14:13

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

**COMMENTS TO AUTHORS**

Authors evaluated the accuracy of stool DNA methylation for early detection of colorectal tumors and concluded fecal SFRP2 methylation could be a promising marker for colon cancer screening. Although this paper is an interesting topic, this paper needs several additional changes which I feel addressing. 1. Authors compared the accuracy of fecal SFRP2 methylation to FOBT. However, they found that fecal SFRP2 methylation is an optical marker for detection of CRCs but not adenomas. They should separately discuss the availability and potential of fecal SFRP2 methylation and FOBT in the screening for CRCs and colorectal adenomas. 2. As stated in the text, previous studies suggested that SFRP can be associated with an early event of colorectal carcinogenesis. However, fecal SFRP2 methylation was not enough for adenoma detection. They should discuss why this happened.

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 9172

**Title:** The Accuracy of early detection of colorectal tumours by stool methylation markers: A Meta-Analysis

**Reviewer code:** 00342154

**Science editor:** Na Ma

**Date sent for review:** 2014-01-25 09:07

**Date reviewed:** 2014-04-08 15:34

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)	<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 checked="" type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

The manuscript by Zhang H et al. reports on the role of stool methylation markers in the early detection of colorectal tumours. This is a timely and relevant issue in the field. The manuscript is well organized and results clearly presented. Nevertheless, there are several points that deserve to be addressed and thoroughly discussed: - In most of the studies considered the number of samples from healthy individuals is low. Could this unbalance situation have introduced statistical biases? - Differences related to ethnicity should be considered and discussed. - Biases possibly due to the different methods used for methylation detection should be also considered. In the Abstract it should be more clearly reported that several data concerning the methylation status of several genes have been analyzed and not only SFRP2. Minor points: Check table 1 for accuracy of gene symbols used (frequently SFRPs are misspells ad SRRP) Footnotes to table 1: + and - appear to reflect the number of individuals with positive and negative test result, respectively, both presenting the disease and normal. Legend appears to restrict this annotation only to individuals "with the disease" Table 2 & 3: Authors should include the total number of individuals of each analyzed grouping, so that the readers can have a rough estimate of their potential relevance. Legend to figure 3: change 2a, 2b, 2c to 3a, 3b, 3c. Spell check and language revision are needed.