



## 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:** 10266

**Title:** Gastric hepatoid adenocarcinoma: CT findings

**Reviewer code:** 00289451

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-03-23 10:44

**Date reviewed:** 2014-03-24 01:06

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)		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 paper provides an interesting CT imaging approach to better distinguish "hepatoid adenocarcinoma of the stomach"(HAS) from other type of clinically similar cancers. Nevertheless, I would suggest a text review and a systematic review of CT findings, in order to help the reader focusing on the conclusions of the described work that could be useful in the correct diagnosis of HAS. For instance, Abstract Conclusion and Conclusion presented at the end of the manuscript should be made more coherent for the reader comprehension, as well as the Discussion section, which presents several confusing statements.



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### ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10266

**Title:** Gastric hepatoid adenocarcinoma: CT findings

**Reviewer code:** 02674061

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-03-23 10:44

**Date reviewed:** 2014-03-24 16:46

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

As above. Major revision is necessary.

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

**ESPS Manuscript NO:** 10266

**Title:** Gastric hepatoid adenocarcinoma: CT findings

**Reviewer code:** 00289440

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-03-23 10:44

**Date reviewed:** 2014-04-01 02:23

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**

Dear editorial According to manuscript entitled : "Gastric hepatoid adenocarcinoma: CT findings" In this case report, The authors evaluated the CT findings of Six patients with biopsy proven hepatoid adenocarcinoma of the stomach retrospectively. Generally, this is a relatively novel study with a good discussion, needs some grammatical corrections. Abstract:OK KEY WORDS: OK INTRODUCTION: OK In method part: Why did you considered Lymph nodes were considered metastatic if they had a short-axis diameter of >6mm for the perigastric lymph nodes and >8 mm for the extraperigastric lymph nodes, please add a reference for this, did it proved with pathology finally? Results: was there any inter and intera observer errors between the two radiologists, reviewing the ct scans? In the patients who underwent surgery was the lymph nodes involved in pathology? What about portal vein thrombosis in the two patients? Do they prove with biopsy? Please note in the text. This sentence" In four of the six patients with surgery revealed lymphadenopathy . All Liver patients had multiple enlarged lymph nodes. "Is not meaningful to me. DISCUSSION:OK CONCLUSION:OK REFERENCES: OK Table legends should be corrected according to the journal policies. In my opinion it is better for the reader to know the data about histopathologic findings of the lymph nodes, liver metastasis and portal vein thrombosis in the four patients who underwent surgery, which you can add in the text or tables. Figures:ok

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

**ESPS Manuscript NO:** 10266

**Title:** Gastric hepatoid adenocarcinoma: CT findings

**Reviewer code:** 02731461

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-03-23 10:44

**Date reviewed:** 2014-04-04 11:30

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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 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 my view, this is a good paper and has a well origination. This paper well described the radiation image and pathological features of gastric hepatoid adenocarcinoma. Besides, I still have two points of recommendations about this paper. First, in the conclusion part, authors mentioned that "In an old male patent with a large heterogenous enhancement tumor,the presence of distant metastases ,regional lymphadenopathy and characteristic increased serum AFP level indicates the high likelihood of HAS.". In my opinion, increased serum AFP level is the most valuable characteristic of gastric hepatoid adenocarcinoma. But the other characteristics such as "old male patent"/" a large heterogenous enhancement tumor"/" the presence of distant metastases"/" regional lymphadenopathy", are also usually seen in other kinds of gastric cancer. So, I think it is inappropriate to put these characteristics together to make a suspect of gastric hepatoid adenocarcinoma. Second, how do we distinguish between gastric hepatoid adenocarcinoma and liver cancer transfer to gastric in pathology? I think authors should present more details in the discussion part.



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### ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10266

**Title:** Gastric hepatoid adenocarcinoma: CT findings

**Reviewer code:** 02664504

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-03-23 10:44

**Date reviewed:** 2014-04-05 16:17

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
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<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

Minor Revisions required: 1. Mention the full forms of abbreviations used. 2. Conclusion need a better description. 3. Table providing the differences between HAS and non-HAS gastric carcinomas will help the readers understand the topic better. 4. Mucinous and non-mucinous tumors mentioned in the manuscript needs further clearance. on reading looks like these are subtypes of HAS. Needs reframing of the sentence.