

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 10181

Title: Magnifying narrow-band imaging with acetic acid for diagnosing early colorectal cancer

Reviewer code: 00742509

Science editor: Su-Xin Gou

Date sent for review: 2014-03-18 13:46

Date reviewed: 2014-05-04 15:04

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 checked="" 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 describes findings related to the diagnostic characteristics of magnifying endoscopy with acetic acid spray and narrow-band imaging (MA-NBI) for early colorectal cancer. The authors suggest that MA-NBI is useful for differentiating early colorectal adenocarcinomas from adenomas. This article is concisely written, and contains interesting findings. The data presented likely support the conclusion made by authors sufficiently. The information given may be helpful to promote the further advance in early diagnosis of colorectal cancer. This reviewer has no essential criticism to the contents.

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

ESPS Manuscript NO: 10181

Title: Magnifying narrow-band imaging with acetic acid for diagnosing early colorectal cancer

Reviewer code: 02451547

Science editor: Su-Xin Gou

Date sent for review: 2014-03-18 13:46

Date reviewed: 2014-05-05 09:05

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 study is to evaluate diagnostic characteristics of MA-NBI for early colorectal cancer. The authors found that MA-NBI was useful for differentiating early colorectal adenocarcinomas from adenomas. The conclusion appears to be justified based upon the data presented. Yet, a couple of issues need to be addressed before the manuscript is considered for publication in "World Journal of Gastroenterology". 1. In phase 2 study, Why did the authors not compare the index such as AUC among these three groups just as phase 1. 2. In the legend of Figure 2, the "n" should be given. 3. In the section of discussion, the authors mentioned that MA-NBI was more time-saving and cost-effective than M-CV. However, no data supported it in this paper, would you please give some proofs. 4. In the section of materials, the authors mentioned that they plotted ROC curve of each modality for 10 colonoscopists. However, in author contributions, only 9 persons were listed to performed colonoscopy, why?

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

ESPS Manuscript NO: 10181

Title: Magnifying narrow-band imaging with acetic acid for diagnosing early colorectal cancer

Reviewer code: 02456377

Science editor: Su-Xin Gou

Date sent for review: 2014-03-18 13:46

Date reviewed: 2014-05-06 20:16

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

In order to evaluate diagnostic characteristics of magnifying endoscopy with acetic acid spray and narrow-band imaging (MA-NBI) for early colorectal cancer, the authors conducted a prospective study with two phases, and drew a conclusion that MA-NBI was useful for differentiating early colorectal adenocarcinomas from adenomas. Main concerns: 1. The sample size of two phases is so small that the authors should add the samples. 2. In the first paragraph of the result section, the authors showed “and not significant for the comparison of M-NBI vs. M-CV) (Figure 2)”. However, the Figure 2 showed that there was significant difference for the comparison of MA-NBI vs. M-CV, so did the Figure 3. 3. The authors used the AUC to compare the three methods in the phase 1, but didn’t use the AUC to compare the methods in the phase 2, why? 4. In the manuscript, the authors mentioned that “we sprayed 0.2% crystal violet solution to the lesion and waited more than one minute before the examination”, which didn’t show that MA-NBI is more time-saving than M-CV.