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315-321 Lockhart Road,
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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6706

Title: A systematic review of novel methods of cytoreduction in locally advanced and metastatic pancreatic cancer.

Reviewer code: 00069015

Science editor: Wen, Ling-Ling

Date sent for review: 2013-10-28 14:03

Date reviewed: 2013-11-12 10:53

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"/> 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

Manuscript entitled "A systematic review of novel methods of cytoreduction in locally advanced and metastatic pancreatic cancer" is well prepared. This article is important in its field. Now, Standard options available for treating patients with inoperable PDAC are limited to chemotherapy, radiotherapy, or a combination of the two. Ablative therapies for unresectable pancreatic cancer are an attractive emerging therapy. Dr Keane wrote this review to assess safety and efficacy of each ablation therapy in the treatment of locally advanced or metastatic PDAC. They found ablative therapies may confer an additional survival benefit over best supportive care but randomised studies are required to validate these findings. This review got a rigorous result and demonstrated that ablation is feasible and reproducible. It is meaningful for the treatment of unresectable locally advanced pancreatic cancer. This article is acceptable.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6706

Title: A systematic review of novel methods of cytoreduction in locally advanced and metastatic pancreatic cancer.

Reviewer code: 02822995

Science editor: Wen, Ling-Ling

Date sent for review: 2013-10-28 14:03

Date reviewed: 2013-11-13 21:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B (Very good)	<input type="checkbox"/> [Y] 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

Congratulations on a well written systematic review. The authors provide a organized, thorough review of current treatment options for locally advanced pancreatic cancer. I have the following comments: 1) Revise the title. First, cytoreduction general includes removal of tumor. Second, the paper does not address metastatic disease. I would recommend: "A Systematic Review of Novel Methods of Ablation in Locally Advanced Pancreatic Cancer" 2) The authors may consider discussing prior randomized controlled trials and observational studies comparing bypass to resection in metastatic pancreatic cancer. Cytoreduction did not provide survival benefit. This could be included in the intro or conclusion. 3) The authors may consider commenting on RFA for metastatic disease or recurrent disease.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6706

Title: A systematic review of novel methods of cytoreduction in locally advanced and metastatic pancreatic cancer.

Reviewer code: 02822979

Science editor: Wen, Ling-Ling

Date sent for review: 2013-10-28 14:03

Date reviewed: 2013-11-18 04:01

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 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"/> 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 authors presented an in-depth review of the current methods of cytoreduction in locally advanced and metastatic pancreatic cancer. A total of 32 published reports were evaluated and discussed, including RFA, HIFU, cryoablation, and photodynamic therapy. The idea of such systematic summary is not completely new, but the manuscript is well written and provides some more information compared to other similar reports (e.g. *Pancreas*. 2011;40:163). Remarks: - In the methods section and figure 1, the authors declare that 32 studies were analysed, while the number of reports in tables 1 to 4 is 37 - Minor language editing is required due to some typographic errors - References are poorly organised with different styles