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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 16253

Title: Bevacizumab in combination with XELOX for the first-line treatment of patients with locally advanced or metastatic colorectal cancer: results of the OBELIX study

Reviewer's code: 03002165

Reviewer's country: France

Science editor: Yuan Qi

Date sent for review: 2015-01-07 16:47

Date reviewed: 2015-01-28 00:55

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This paper is interesting and confirms the results of PFS objectified in the Phase III studies; -major criticisms: However, there 's no information about the average doses of chemotherapy received and about bevacizumab monotherapy continued after chemotherapy per patient. Indeed, the fact of continuing the XELOX bevacizumab schedule followed by monotherapy bevacizumab until disease progression is not a standard treatment and these data are important. we don't have any data about the later lines of treatment: TML strategy ? anti-EGFR therapy? -minor criticism the discussion is a bit short on the therapeutic approach in 1st line



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Title: Bevacizumab in combination with XELOX for the first-line treatment of patients with locally advanced or metastatic colorectal cancer: results of the OBELIX study

Reviewer’s code: 03002162

Reviewer’s country: China

Science editor: Yuan Qi

Date sent for review: 2015-01-07 16:47

Date reviewed: 2015-01-23 12:44

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The authors confirm previous results on the positive outcome of bevacizumab/XELOX combination treatment in patients with locally advanced or metastatic colorectal cancer in Italy. This is a meaningful research. However, there are some shortcomings of this study, which are outlined below.

1. The authors only provided the 95% CI of each outcome, please add the P value as well.
2. Please add some contents to introduce the included drugs in the passage of "Treatment".
3. In the passage of "Treatment" the authors mentioned "Second line chemotherapy was at the investigator's discretion", it remains suspicious whether this will affect the results of this study.
4. The limitation of this manuscript is the lack of control group. The authors compared all results with previous studies, however, it would be more reasonable to compare a control group with conventional treatments in Italy.
5. The total number of "Site of metastases" in table 1 is not 197 or 205. The authors should check these numbers.