

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 15577

**Title:** FAMILIAL COLORECTAL CANCER SCREENING: WHEN AND WHAT TO DO

**Reviewer's code:** 00209021

**Reviewer's country:** Turkey

**Science editor:** Yuan Qi

**Date sent for review:** 2014-11-29 22:54

**Date reviewed:** 2014-12-30 21:19

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed 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"/> [ ] The same title	<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"/> [ ] Duplicate publication	<input type="checkbox"/> [ ] Rejection
<input type="checkbox"/> [ ] Grade D: Fair	<input type="checkbox"/> [ ] Grade D: Rejected	<input type="checkbox"/> [ Y] No	<input type="checkbox"/> [ ] Minor revision
<input type="checkbox"/> [ ] Grade E: Poor		BPG Search:	<input type="checkbox"/> [ ] Major revision
		<input type="checkbox"/> [ ] The same title	
		<input type="checkbox"/> [ ] Duplicate publication	
		<input type="checkbox"/> [ ] Plagiarism	
		<input type="checkbox"/> [ Y] No	

## COMMENTS TO AUTHORS

Dear editor, I should congratulate the authors. The manuscript is well prepared and outlines documented facts in the field of familial colorectal carcinoma screening. The references are up to date. Only minor verbal corrections are needed; Abstract: diffuse should be changed with widespread, addiction must be changed with addition, healthy must be changed with health Introduction: amartomatous must be changed with hamartomatous, Authors with authors Faecal DNA test: development with developed

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 15577

**Title:** FAMILIAL COLORECTAL CANCER SCREENING: WHEN AND WHAT TO DO

**Reviewer's code:** 00181182

**Reviewer's country:** Germany

**Science editor:** Yuan Qi

**Date sent for review:** 2014-11-29 22:54

**Date reviewed:** 2015-01-08 23:21

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"/> Plagiarism	<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

Interesting review, dealing with the important issues of Screening of CRC to date. However there are some minor issues which should be addressed. The article focuses mainly on US studies and Italian trials. It would be interesting to include some of the Asian data on the topic. Further I would propose to include an overview of the ongoing trials on the subject. Besides this, new technologies should be addressed in more detail. Finally text structure and english grammar should be checked by a native speaker, as some sentences appear to be difficult to understand.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 15577

**Title:** FAMILIAL COLORECTAL CANCER SCREENING: WHEN AND WHAT TO DO

**Reviewer's code:** 00068250

**Reviewer's country:** China

**Science editor:** Yuan Qi

**Date sent for review:** 2014-11-29 22:54

**Date reviewed:** 2015-01-25 20:07

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"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

## COMMENTS TO AUTHORS

1 The authors are suggested to present the factors that result in the increased risk of familial CRC development, including genetic (familial polyposis), customary life-style and circumstances. 2 The authors introduced several modalities for CRC screening. They are suggested to discuss the advantages and disadvantages of these methods in application, including successful rates, positive rates and accuracy. 3 An overview of this population is necessary, such as CRC-related mortality. 4 Please correct typo and edit errors. Grammatical errors exist.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 15577

**Title:** FAMILIAL COLORECTAL CANCER SCREENING: WHEN AND WHAT TO DO

**Reviewer's code:** 00068443

**Reviewer's country:** China

**Science editor:** Yuan Qi

**Date sent for review:** 2014-11-29 22:54

**Date reviewed:** 2015-01-26 15:01

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 checked="" 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 type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input checked="" 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 type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

The authors are focus of the methods for detecting colorectal cancer and strategies for colorectal cancer screening. The paper is clearly written and contains valuable information. However, there are some typos and grammatical errors in the text. -ABSTRACT: Sigmoidoscopy, alone or in addition to FOBT, -ABSTRACT: The choice of test depends on local healthy policy -INTRODUCTION: the adenomatous and amartomatous polyposis syndromes, -INTRODUCTION: the Authors demonstrated that -FAMILIAL CRC SCREENING: WHEN TO DO: The majority of screening recommendation take into consideration the so called anticipation phenomenon suggesting that CRC arises 10 years earlier in FDR of a CRC patient than in subjects without a family history (28, 29). -Faecal DNA test: Remains uncertainty if ADA can be reliably detected. -Screening colonoscopy: A so low acceptability of colonoscopy in FDRs may have several reasons, such as an insufficient information about the usefulness of a colonoscopy, including the possibility to detect and remove preneoplastic lesions, which really allows to prevent CRC in contrast to other screening tests. -Faecal DNA test: More information should be given also about the few risk associated with colonoscopy and the possibility to perform the exam under sedation to reduce discomfort.