

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 17335

**Title:** Annexin A10 expression in colorectal cancers with emphasis on the serrated neoplasia pathway

**Reviewer's code:** 03003381

**Reviewer's country:** Japan

**Science editor:** Yuan Qi

**Date sent for review:** 2015-03-02 14:48

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<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 showed that Annexin A10 could be used as a surrogate marker of the serrated neoplasia pathway in invasive colorectal cancers. The authors found that Annexin A10 expression is associated with poor clinical behavior in stage IV colorectal cancers. The findings are interesting, but I have some comments. My major comments are as follows. 1. Adjuvant chemotherapy after surgery may be used for high risk stage II or stage III- IV colorectal cancer and it may influence patient outcomes. More detailed information about chemotherapy after surgery should be provided. 2. The similar study performed by Sajanti SA et al. (Virchows Arch 2014) reported that Annexin A10 expression did not associate with tumor stage or grade. A possible explanation for this discrepancy should be provided in discussion. I hope these comments will be helpful.

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

**ESPS manuscript NO:** 17335

**Title:** Annexin A10 expression in colorectal cancers with emphasis on the serrated neoplasia pathway

**Reviewer's code:** 02446365

**Reviewer's country:** China

**Science editor:** Yuan Qi

**Date sent for review:** 2015-03-02 14:48

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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 type="checkbox"/> Plagiarism	<input checked="" 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

This manuscript demonstrated the relationship of annexin 10 and colorectal cancer. These authors provided several interesting points such as annexin 10 expression was collated with CIMP, microsatellite instability and BRAF mutation in colorectal cancer. The manuscript is well written and could be accepted for publication after some modification. 1. The expression of annexin 10 was only detectable in nearly 6% patients. The frequency was too low to be a clinical marker as author claimed. 2. The authors should indicated the patients number of survival curve in figure 3 and 4. If the patients number is too low, I wonder if this could be clinical significant. 3. Several typos should be corrected.