

## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 13295

**Title:** A Case of Gastric Metastasis from Small Cell Lung Cancer

**Reviewer code:** 02903781

**Science editor:** Yuan Qi

**Date sent for review:** 2014-08-18 10:05

**Date reviewed:** 2014-08-25 00:43

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"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

Lung cancer metastases to the gastrointestinal system, and especially to the stomach are rare, most cases of stomach metastases are asymptomatic and as a result are usually only discovered at autopsy. The author report a rare case of gastric metastasis originated from small cell lung cancer. The patient was admitted to hospital because of abdominal pain, underwent a gastroscopy, the pathological report of the tissue biopsy proved it to be a small cell cancer, and the immunohistochemistry was positive for CD56, synaptophysin and pan-cytokeratin, the result confirmed the diagnosis of gastric metastasis of a neuroendocrine small cell carcinoma from lung. There are many revision in this article. The references are too olden, the most recent references were published in 2011, there is no reference published in recent 3 years. However, there are many articles about gastric metastasis from lung cancer published in recent 3 years, such as: 1. Gastric metastasis of lung cancer mimicking an adrenal tumor. Case Rep Gastroenterol. 2014 Mar 13;8(1):77-81. 2. Solitary gastric metastasis from primary lung adenocarcinoma: a rare site of extra-thoracic metastatic disease. J Gastrointest Oncol. 2013 Jun;4(2):E11-5. 3. A suspicious case of metastasis to the stomach from primary lung cancer; report of a case. Kyobu Geka. 2012 Nov;65(12):1093-6. 4. Solitary metachronous gastric metastasis from pulmonary adenocarcinoma: Report of a case. Int J Surg Case Rep. 2012;3(8):385-8. The patient was diagnosed lung cancer in February 2013. On admission, a computed tomography (CT) scan of the chest showed a lung mass about 5.0cm×4.0cm size at the right hilum. The sputum cytology proved it to be small cell lung cancer. Approximately 50% of patients have widespread metastatic disease at the



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time of initial diagnosis. The preferential metastatic sites are the brain, liver, adrenal glands, bone, and bone marrow. The author should identify whether the patient have widespread metastatic disease at the time of initial diagnosis, the patient whether received PET scans or other detection. The patient was hospitalized and tolerated five successive courses of the chemotherapy with etoposide (120mg/m<sup>2</sup>D1+D2+D3-D1=D21) and cisplatin (100mg/m<sup>2</sup>D1-D1=D21), and followed chest radiation(54Gy/30fracitons/42days). After chemotherapy and chest radiation, the patient whether received CT scan to identify the results of chemotherapy and chest radiation.