

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13353

Title: Absolute monocyte and lymphocyte count prognostic score for patients with gastric cancer

Reviewer code: 00342603

Science editor: Jing Yu

Date sent for review: 2014-08-20 11:07

Date reviewed: 2014-08-21 20:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Manuscript: 13353 Eo et al, "Absolute monocyte and lymphocyte count prognostic score for patients with gastric cancer" Comments: 1. The authors used the ANOVA for mean comparisons, please state in the manuscript that the variables used for the ANOVA analysis showed normal distribution; otherwise the ANOVA is not correct statistical method, then a non-parametric method needs to be used for comparing the medians and not the means. 2. In the multivariate analysis for both OS and DFS, only age, TNM, and AMLPS were the only predictors I would recommend to shorten the section in the Results section by stating something like: "In the multivariate analysis, the only predictors for OS and DFS were age, TNM staging system and AMLPS. 3. Since one of the possible mechanisms of the AMLPS is the balance between host immunosurveillance (i.e., ALC) versus tumor growth (i.e., AMC), I think the authors should add a section in the discussion supporting this hypothesis by the results they presented on Table 3. Higher percentage of cases for T3-4, N1-3, and stage III was observed from low-risk to high risk. In similar fashion a decrease percentage for T1-2, N0, and stage I-II was observed from low-risk to high risk, supporting by the authors own data the balance between ALC (immunosurveillance) versus AMC (tumor growth).

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13353

Title: Absolute monocyte and lymphocyte count prognostic score for patients with gastric cancer

Reviewer code: 02977382

Science editor: Jing Yu

Date sent for review: 2014-08-20 11:07

Date reviewed: 2014-09-06 23:27

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The paper is to measure the prognostic significance of absolute monocyte count/ absolute lymphocyte count prognostic score (AMLPS) in patients with gastric cancer and to assess the AMLPS as an independent prognostic factor for survival in comparison with known prognostic factors. Although some published paper have showed the same change in hematological tumor, the finding in solid cancer in this paper should actually be interpreted cautiously. One question is how the author can prove AMLPS is stable in one case/in one type of AMLPS risk groups. It is mean if we test AMC and ALC several times before operation, do three risk groups change? Please give me some evidence. In Table 4 and 5, for AMLPS, can author add the comparison between Intermediate-risk and high-risk?