

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 23061

Title: Metastatic Gastric Cancer Treatment: Second line and Beyond

Reviewer's code: 02444931

Reviewer's country: China

Science editor: Yuan Qi

Date sent for review: 2015-10-17 19:15

Date reviewed: 2015-10-29 09:37

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 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"/> 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 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 type="checkbox"/> No	

COMMENTS TO AUTHORS

Authors reviewed the chemotherapeutic progress of advanced gastric cancer. 1.They had better depict a graphic picture which vividly shows targets for different monoclonal antibodies. 2.Spelling errors need to be corrected. In page 3: "there was no solid solid evidence that" should be "there was no solid evidence that"; Page7: "It remains unclear wether the absence of perceivable benefit" should be "It remains unclear whether the absence of perceivable benefit"; and so on. 3.Table 1 should be cited in the context. 4.Table 2 is missing.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 23061

Title: Metastatic Gastric Cancer Treatment: Second line and Beyond

Reviewer's code: 02438759

Reviewer's country: China

Science editor: Yuan Qi

Date sent for review: 2015-10-17 19:15

Date reviewed: 2015-10-29 15:36

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 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		<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 review was expounded noteworthy published data involving the use of additional lines of the therapy after failure of standard frontline therapies in patients with aGC. According to current situation of the therapy in advanced Gastric Cancer (aGC), not amenable to curative surgery the author suggested that patients who progress beyond second-line therapy, treatment should be considered very carefully, as to avoid unwanted toxicities that would do more harm than good. Apatinib and Pembrolizumab offer considerable opportunities for the near future, but their value is still to be weighed in larger trials. The review contains some new information and suggestions about therapy of aGC which is helpful for clinical treatment of aGC.