

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 24852

Title: Long-term outcomes and prognostic factors of patients with obstructive colorectal cancer: A multicenter retrospective cohort study.

Reviewer's code: 00503563

Reviewer's country: Japan

Science editor: Yuan Qi

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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"/> No	<input checked="" 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 checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The authors demonstrated that T4 tumor status and R1 resection are independent prognostic factors in patients with obstructive colorectal cancer (CRC). Although this manuscript is important for the clinical management of patients with CRC, there are some queries and comments. Comment 1. Prognostic nutritional index (PNI) was indicated as a clinicopathological factor in Table 1. However, PNI was not assessed in univariate and multivariate analyses (Table 3 and 4). Why did the authors include PNI as a factor in univariate and multivariate analyses? 2. Misspelling: The 5-year DSF (DFS) of the patients with stage II and III disease were 47.4% and 55.1%, respectively. 3. In the present study, T4 tumor status and R1 resection are independent prognostic factors. Survival curves based on Kaplan-Meier method should be indicated as a Figure.