

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 18855

Title: Cytoreductive surgery and hyperthermic intraperitoneal chemotherapy in gastric cancer

Reviewer's code: 00058401

Reviewer's country: Brazil

Science editor: Ya-Juan Ma

Date sent for review: 2015-05-05 21:05

Date reviewed: 2015-05-14 03:18

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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 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

Congratulations for the quality of the work-liberatocaboclo@gmail.com.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 18855

Title: Cytoreductive surgery and hyperthermic intraperitoneal chemotherapy in gastric cancer

Reviewer's code: 00502831

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2015-05-05 21:05

Date reviewed: 2015-07-02 19:34

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 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 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		<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

The authors reported about the cytoreductive surgery and hyperthermic intraperitoneal chemotherapy in gastric cancer. I think this article is usefulness of realizing the treatment of peritoneal metastasis from gastric cancer. However, there is lack of recent treatments of peritoneal metastasis from gastric cancer. Moreover, adverse effects of cytoreductive surgery and hyperthermic intraperitoneal chemotherapy were very severe, and these treatments have a lot of costs and the ethical problems. So, these treatments are able to be performed in limited a few institutions and for limited a few patients. The authors listed hyperthermic intraperitoneal chemotherapy for peritoneal metastasis from gastric cancer. But the used drugs were conventional anticancer drugs such as MMC, CDDP, 5-FU and etoposide. I think these drugs may be not effective for peritoneal metastasis. Recently effectiveness for peritoneal metastasis from gastric cancer of combination therapy with docetaxel of intraperitoneal and intravenous administration has been reported. This treatment is thought to be safe and effective. The authors should described usefulness of intraperitoneal administration of Doc and introduced several clinical study about intraperitoneal and intravenous



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administration therapy with Doc.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 18855

Title: Cytoreductive surgery and hyperthermic intraperitoneal chemotherapy in gastric cancer

Reviewer's code: 03017854

Reviewer's country: United States

Science editor: Ya-Juan Ma

Date sent for review: 2015-05-05 21:05

Date reviewed: 2015-07-11 03:10

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B: Very good	<input type="checkbox"/> [Y] 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"/> [Y] No	<input 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 type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

In this original manuscript Ramakrishnan and colleagues compiled and reviewed HIPEC in patients with gastric cancer and peritoneal carcinomatosis (GCPC). This review manuscript nicely captures the overview and current state of HIPEC for patients with GCPC. The manuscript discusses the mechanism of peritoneal carcinomatosis and then focuses on the risks and benefits of HIPEC in the neoadjuvant, adjuvant and palliative settings. In each setting, the authors discuss and compile nice tables for trials that specific to each clinical setting. The authors conclude that while HIPEC is not the standard of care, the "role of CRS with HIPEC in GC with macroscopic PC is still evolving and needs to be addressed in large multi-institutional randomised trials." The article is well organized and well written, and moderately relevant to the overall journal readership. The in-depth content reflects the authors' expertise in the field. There is significant variability in the quality of published PC trials and the authors should address this in a more formal method. I think the importance of this review would be improved if the authors assigned a grading criteria to the quality of the evidence supporting the described clinical situations. A general A, B, C with a brief description in the



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beginning of the review would be helpful to the reader. I also feel the emerging bi-directional evidence involving systemic and intraperitoneal chemotherapy should be discussed in more detail. I would expand some on the role of docetaxel and less on the older studies, but this is not required for publication. The review dose seem to paint HIPEC in a positive light, and the potential complications and adverse effects could be expanded upon. Overall I feel this is acceptable for publication.