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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 27135

Title: Predicting the malignant direction in transition of esophageal squamous cell lesions by combined biomarkers in endoscopic screening program

Reviewer's code: 02575643

Reviewer's country: Italy

Science editor: Ya-Juan Ma

Date sent for review: 2016-06-20 16:27

Date reviewed: 2016-06-20 18:29

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 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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 SAME COMMENTS MADE TO THE EDITORS



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 27135

Title: Predicting the malignant direction in transition of esophageal squamous cell lesions by combined biomarkers in endoscopic screening program

Reviewer's code: 00058573

Reviewer's country: India

Science editor: Ya-Juan Ma

Date sent for review: 2016-06-20 16:27

Date reviewed: 2016-07-11 12:13

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 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"/> 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

Good study. Few queries 1. Why were subjects with liver diseases and cardiovascular diseases excluded from the study? Please provide explanation 2. It would have been better if the CONTROLS were taken from normal population and not from high risk zone. 3. ESCC is being used in abstract without giving its full version



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 27135

Title: Predicting the malignant direction in transition of esophageal squamous cell lesions by combined biomarkers in endoscopic screening program

Reviewer's code: 03475059

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2016-06-20 16:27

Date reviewed: 2016-07-11 15:53

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 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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" 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

Summary "Predicting malignant direction of esophageal squamous cell lesions by combined biomarkers in endoscopic screening program" revealed combined assessment of p53, CEA and CA19-9 could predict the malignant potential of esophageal lesions. The concept of the study is clinically relevant, but there are several questions. Major comments 1. The specificity of all lesions was 88%. Is it correct? Since the sensitivity was different among these lesions, the specificity should be different. 2. Why was school year or per capita income related to esophageal lesions? 3. Positive rates of p53 and CEA were significantly related to age. Is there still relationship between these biomarkers and esophageal lesions when age is adjusted? 4. There are several biomarkers relating to squamous cell carcinoma such as CYFRA. Why did you choose three biomarkers? 5. Stained biomarker in the biopsy specimens may be different from detected biomarker in the serum. The concentration of these biomarkers may be too low to detect in the serum, but it is better to show it. This data can indicate one of limitations in this study. 6. As you noted, the positive rates of biomarkers in normal specimens were too high. If iodine staining was used, it should be easy to take



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biopsy from normal esophageal mucosa. What kind of endoscopy system was used? In addition, are doctors who performed endoscopy well-trained endoscopists? Minor comments 1. There are a □ several times in page 6. This should be corrected. 2. "P<0.01" should be "p<0.01". "p" should be a small character.