



**ESPS PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 28705

**Title:** Two cases of adenocarcinoma occurring in sporadic fundic gland polyps observed by magnifying endoscopy with narrow band imaging

**Reviewer’s code:** 02954019

**Reviewer’s country:** Japan

**Science editor:** Yuan Qi

**Date sent for review:** 2016-07-13 16:48

**Date reviewed:** 2016-07-26 23:49

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

This is a well written manuscript describing the significance of endoscopic findings of sporadic fundic gland polyps with malignant potential. Because sporadic fundic gland polyps are usually regarded as a benign lesion with normal background mucosa, this paper is important for clinicians. Minor points 1. Based on the findings of this case report, we must encounter more frequently a large size of early gastric cancer originated from fundic gland polyps in daily clinical practice. However, such endoscopic findings have not been known, to date. What is the fate of this well differentiated adenocarcinoma from fundic gland polyps? Is there a possibility that such cancer does not increase in size or even diminish spontaneously? Authors should refer to this point in Discussion. 2. The Reference concerning the background mucosa of fundic gland polyps (no H. pylori infection without atrophy) should be added. Kishikawa et al referred to the background mucosa of fundic gland polyps in Clin Res Hepatol Gastroenterol 2014, 38: 505-12.



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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 28705

**Title:** Two cases of adenocarcinoma occurring in sporadic fundic gland polyps observed by magnifying endoscopy with narrow band imaging

**Reviewer's code:** 01430832

**Reviewer's country:** Argentina

**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 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"/> 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		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

1. The incidence of low grade dysplasia in systemic or sporadic FGP of 25% is only seen in FAP, never in patients under proton pump inhibitors. 2. The differentiation made using NBI is the first time reported and is indeed very accurate. However, this differentiation can be also easily noted by using conventional endoscopy. 3. I am very concerned with the finding of dysplasia or adenocarcinoma in systemic FGPs. This polyps are every day more common in adults undergoing upper endoscopy examinations and in patients under proton pump inhibitors (sometimes having more than 20 polyps). Both cases reported here didn't take the proton pump inhibitors nor had FAP. It would have been appreciated if they had speculated something more in the discussion about this finding.