



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 28819

Title: Lymphovascular invasion in more than one-quarter of small rectal neuroendocrine tumors

Reviewer’s code: 00699087

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Science editor: Yuan Qi

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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 checked="" 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

Lymphovascular invasion in more than one-quarter of small rectal neuroendocrine tumors In this article, authors analyzed the frequency of lymphovascular invasion in small rectal neuroendocrine tumors resected endoscopically. This article is well written and they estimated the lymphovascular invasion by precise methods and compared with conventional H&E staining. By these methods, they revealed the frequency of lymphovascular invasion was higher compared with the ratio reported so far. Although they could not find out the relationship between lymphovascular invasion and clinical outcome, such as survival and recurrence, this study will provide very important aspects for future study. I think it will be better if they contain more discussion of the importance of this study for future clinical problems (last paragraph of discussion section. I think there should be several cases of recurrence with more long time observation. Please emphasize these points more.). There are several minor points which should be reconsidered. 1) Last paragraph of Introduction “determined which clinicopathological risk factors are associated with LVI” LVI itself might be the risk factor. So please reconsider this sentence, like determined the clinical impact of LVI or etc. 2) Materials and methods



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

What is the indication of endoscopic resection of NETs? What kind of patients underwent surgical resection? Please describe the indication. 3) Results What were the reasons for additional surgery in three patients? Also please provide more detail of the patients with lymph node metastasis (tumor size, LVI rate etc.) 4) Several spelling error 1. Put spaces ① P6 line 17: 13 patients→13 patients ② P7 line 7: submucosal → submucosal ③ P8 line 3 from the bottom: werethen→were then ④ P10 line 3: 0.24 mm, 1.0 mm→0.24 cm, 1.0 cm (Please confirm) ⑤ P10 line4 from the bottom: 26(25.0%)→26 (25.0%) ⑥ P11 line 2: significant (P=0.648).LVI as...→). LVI (put space) ⑦ P15 line 3: ... of 4 a mm→of 4 mm