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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 33365

Title: Laparoscopic management of gastric gastrointestinal stromal tumors: a retrospective 10-year single-center experience(with Video)

Reviewer's code: 00057951

Reviewer's country: Chile

Science editor: Ze-Mao Gong

Date sent for review: 2017-02-08 11:54

Date reviewed: 2017-02-09 00:43

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"/> Plagiarism	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> [Y] No	<input type="checkbox"/> [] Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

Congratulations on your fine work



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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 33365

Title: Laparoscopic management of gastric gastrointestinal stromal tumors: a retrospective 10-year single-center experience(with Video)

Reviewer's code: 03666022

Reviewer's country: Poland

Science editor: Ze-Mao Gong

Date sent for review: 2017-02-08 11:54

Date reviewed: 2017-02-24 17:57

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 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 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 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

This is a very interesting study concerning new techniques of GIST resection in stomach localization. To date it is widely accepted (NCCN guidelines) that laparoscopy is safe, with good outcome in disease-free survival time (DFS). In the paper authors noted very low recurrence rate independently of favorable and unfavorable localization (1,98%), however period of time from the operation to the recurrence would be worth mentioning. Some other additional data would be interesting. First of all, I would recommend to add whether patients with iatrogenic ruptured tumor were included in recurrent group of cases? What was the follow-up period for these cases, what were the results for group of patients with full 5-years follow-up period (authors indicated 7-107 month observation for all cases). Which laparoscopic technique was performed in patients with recurrent disease? Were there any differences in tumor localization and other characteristic between groups operated with different techniques. I think, with additional information introduced to the "result" section and adequately discussed, paper would be complete and worth publication.