

## PEER-REVIEW REPORT

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

**Manuscript NO:** 41855

**Title:** Clinicopathological Parameters Predicting Recurrence of pT1N0 Esophageal Squamous Cell Carcinoma

**Reviewer's code:** 02941357

**Reviewer's country:** Netherlands

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-09-02

**Date reviewed:** 2018-09-06

**Review time:** 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Hereby I would like to comment on the article entitled: "Clinicopathological Parameters Predicting Recurrence of pT1N0 Esophageal Squamous Cell Carcinoma" by the authors Li-yan Xue et al. The authors present recurrence rate of pT1N0 tumours in a large cohort



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of 218 patients in a single institute. This is a large series and more insight in recurrence patterns of T1 esophageal cancers is important to customize neoadjuvant and surgical treatment. However, the retrospective nature of the study and the different surgical approaches used may be important confounding factors. For example, most “recurrences” were early and almost always in cervical and/or mediastinal lymph nodes. One could argue whether the surgical lymph node dissection was adequate in these patients. The authors need to address this issue and specify the exact surgical procedures with regard to lymph node dissection. Furthermore, it is unclear how recurrence was measured. Did the authors perform scans/ endoscopies on a regular basis or did only symptomatic cases undergo further diagnostics. Minor comments: The discussion needs to be shortened and repetition of results should be avoided.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 41855

**Title:** Clinicopathological Parameters Predicting Recurrence of pT1N0 Esophageal Squamous Cell Carcinoma

**Reviewer's code:** 03473712

**Reviewer's country:** United States

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-09-02

**Date reviewed:** 2018-09-20

**Review time:** 18 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
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### SPECIFIC COMMENTS TO AUTHORS

Well written study. Useful information

### INITIAL REVIEW OF THE MANUSCRIPT



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## PEER-REVIEW REPORT

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

**Manuscript NO:** 41855

**Title:** Clinicopathological Parameters Predicting Recurrence of pT1N0 Esophageal Squamous Cell Carcinoma

**Reviewer's code:** 03036083

**Reviewer's country:** Japan

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-09-26

**Date reviewed:** 2018-09-27

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Authors showed a very excellent survival for pT1N0M0 ESCC. As the authors mentioned, the recurrence rate for pT1N0M0 ESCC is higher than other gastrointestinal cancers. Detecting the metastasis as fast as possible is important to improve the



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prognosis. Therefore, this article is very interesting and meaningful. 1. Authors showed that cervical or upper thoracic tumor location has a high rate of cervical lymph node metastasis. You might be able to avoid it if 3-field lymphadenectomy was performed; however, the benefit of 3-field lymphadenectomy is still controversial. From your result, do you think that 3-field lymphadenectomy should be performed for cases with cervical or upper thoracic ESCC? Please discuss about it. 2. Tumor located in the cervical should be excluded, because it has poorer prognosis than thoracic esophagus.

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