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## PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 57689

Title: Role of DCLK1 and Lgr5 in patients with stage II/III colorectal cancer: Cancer

progression and prognosis

Reviewer's code: 01557283 Position: Editorial Board Academic degree: MD, PhD

**Professional title:** Associate Professor, Surgeon

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-06-19

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-08-13 20:36

Reviewer performed review: 2020-08-24 13:33

**Review time:** 10 Days and 16 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No



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## SPECIFIC COMMENTS TO AUTHORS

Summary of the present manuscript. The authors clearly showed that higher DCLK1 and Lgr5 expressions were significantly and independently associated with poorer PFS and OS in patients with stage II and III colorectal cancer. However, some data should be additionally expressed in the present study. Major comments. 1. The relationships between recurrence sites and DCLK1/Lgr5 should be shown. 2. Postoperative adjuvant chemotherapy should be described. 3. The relationship between tumor markers (CEA and CA19-9) and DCLK1/Lgr5 should be shown. 4. Palliative treatments after recurrence, e.g., chemotherapy, radiation therapy, or others should be described. 5. How many patients underwent hepatectomy, pulmonary resection, and other surgical treatment? 6. The relationships between K-ras/BRAF/MSI and DCLK1/Lgr5 should be shown. 7. To confirm whether DCLK1 and Lgr5 were independent strong prognosticators, many factors should be added to the multivariate analyses of survival, e.g., preoperative CEA, preoperative CA19-9, adjuvant chemotherapy, K-ras mutation, BRAF mutation, MSI, etc.



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Name of journal: World Journal of Gastroenterology

Manuscript NO: 57689

Title: Role of DCLK1 and Lgr5 in patients with stage II/III colorectal cancer: Cancer

progression and prognosis

Reviewer's code: 01799104 Position: Editorial Board

**Academic degree:** AGAF, MD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2020-06-19

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Reviewer performed review: 2020-08-27 22:24

Review time: 12 Days and 20 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No
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The study found that association between cancer stem cell IHC markers and prognosis of CRC. Although sidedness has been shown not a univariate or multivariate factor in table 3, is there any explanation in table 1? Besides, do other factors such as blood tumor marker, metastatic sites or treatment modalities have any other correlation?