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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 71888

Title: Endoscopic resection for early gastric cancer: Towards a global understanding

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05058806 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2021-09-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-29 05:07

Reviewer performed review: 2021-10-03 12:53

Review time: 4 Days and 7 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors' opinions are very relevant. Endoscopic diagnostic and therapeutic skills, and the efficiency of screening programs are important for reducing gastric cancer deaths. In the West, there may be fewer opportunities for gastric ESD training than in East Asia, but if you have a lot of colon ESD training, that shouldn't be a problem. The authors said that there are many younger generations of stomach cancer in Italy, but what about the relationship with H. pylori infection? If it is not H. pylori uninfected gastric cancer, the combination of H. pylori antibody titer and pepsinogen level may be useful for screening as in Japan.1) 1) Yamaguchi Y, Nagata Y, Hiratsuka R, et al. Gastric Cancer Screening by Combined Assay for Serum Anti-Helicobacter pylori IgG Antibody and Serum Pepsinogen Levels--The ABC Method. Digestion 2016; 93(1);13-8.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

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Reviewer's code: 05405967 Position: Peer Reviewer Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Switzerland

Author's Country/Territory: Italy

Manuscript submission date: 2021-09-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-04 04:18

Reviewer performed review: 2021-10-04 04:26

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] 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) [] Minor revision [] Major revision [Y] Rejection
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SPECIFIC COMMENTS TO AUTHORS

The letter reports that endoscopic treatment of precancerous lesions and early gastric cancer reduces rates of advanced carcinoma and avoids the requirement for surgery, but between East and West there are relevant differences in the data, on the practice of endoscopic resection and on the histological definitions of lesions. In addition: "Our ongoing Italian multicenter prospective observational study on gastric endoscopic submucosal dissections has so far enrolled 24 cases in 18 months in 12 centers". There is no really new information for the reader. A few misspellings should be corrected, e.g., references in front or after full stop.