

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 79487

Title: Survival benefit of younger gastric cancer patients in China than the US: a comparative study of survival, prediction model, and biological analysis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05400626

Position: Peer Reviewer

Academic degree: FACS, MD, MNAMS

Professional title: Doctor, Professor, Surgeon

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2022-08-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-08 02:22

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Review time: 12 Days and 19 Hours

Scientific quality	<input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Very good <input type="radio"/> Grade C: Good <input type="radio"/> Grade D: Fair <input type="radio"/> Grade E: Do not publish
Language quality	<input type="radio"/> Grade A: Priority publishing <input checked="" type="radio"/> Grade B: Minor language polishing <input type="radio"/> Grade C: A great deal of language polishing <input type="radio"/> Grade D: Rejection
Conclusion	<input type="radio"/> Accept (High priority) <input checked="" type="radio"/> Accept (General priority) <input type="radio"/> Minor revision <input type="radio"/> Major revision <input type="radio"/> Rejection
Re-review	<input checked="" type="radio"/> Yes <input type="radio"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Dear Authors, Congratulations on writing this article. The article will need few grammatical conditions, which may please be done

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Reviewer's code: 03270609

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

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Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-17 17:12

Reviewer performed review: 2022-10-23 10:49

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

The authors compared clinicopathological characteristics, prognostic nomogram, and biological analysis in gastric cancer patients in China and the US. Such studies are of great importance, as they make it possible to establish new factors influencing the prognosis of the disease and note new approaches to the treatment of this formidable disease. The authors used one of the largest patient samples, which made it possible to construct prognostic nomograms for younger gastric cancer patients in China and the USA. The data obtained are undoubtedly of great interest for practical and fundamental oncology. At the same time, one cannot fail to note a number of significant, but quite correctable shortcomings of the submitted manuscript. Abstract Please edit the purpose of the study, noting that the comparison of the studied characteristics was performed in patients with gastric cancer. In the methods, it should be noted that the SEER database is a program of the National Cancer Institute USA. Unfortunately, the authors in the Abstract did not reflect the possible reasons for the observed differences in survival (e.g., differences in disease stage, tumor location, differentiation, linitis plastica) and factors that contributed to the improvement in the survival of patients with gastric cancer in China (e.g., early cancer screening and other). My opinion is that these data should be indicated in the Abstract, as they are of great importance. Statistical Analysis Without considering the distribution of variables, the use of the Student's t-test to compare continuous variables is highly questionable. Results The statement "Compare to the US, China group has a higher ratio of younger patients over periods" does not correspond to the data in Table 1. It is true only for the period from 2009 to 2013. The interpretation of the results of Table 1 requires serious revision due to the inaccuracies identified in it



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(some percentages are calculated incorrectly, since a number of characteristics do not add up to 100%). It hardly makes sense to include in the prognostic nomogram the period in which patients received treatment. In the same way, one must be careful when interpreting data on surgical treatment, since the authors combined into one group patients with known data (there was no operation, there was no lymphadenectomy - the latter is very doubtful) and patients in whom information about this was absent. Moreover, for example, in a univariate analysis, the presence of chemotherapy in patients with gastric cancer was associated with an unfavorable prognosis, while in a multivariate analysis, on the contrary, with an improvement in the prognosis of the disease. The presentation of the ROC curves in the manuscript would greatly improve the demonstration of the proposed model. Supplementary Material - not loaded into the system. Discussion Considering that the authors did not distinguish between cases where surgery and proper volume of lymph node dissection were not performed and cases where these data were unknown, the interpretation of differences in treatment tactics in the US and China should be very cautious. Tables In Table 1, for some characteristics, the percentage of cases does not add up to 100%. This applies, for example, to "Primary tumor location", "Differentiation" and many other characteristics. It is necessary to carefully recalculate the percentages in all groups"!!!. In addition, it is necessary to check the absolute values of the indicators. For example, in the USA, the number of patients with M1 is 1492, while the number of patients with stage IV gastric cancer is 1687. Indicate in the titles of the tables or in the notation which analysis (univariate or multivariate analysis) was used in tables 3 and 4. Figures The drawings are layered on each other and on the captions. Figure 3. If you want to show differences in survival between compared groups, it is more representative to use one vertical dashed line from one, three, or five years, and two horizontal dotted lines from its intersection with survival probability curves. In this case, you are showing exactly the



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differences in survival between groups. Figure 3A is not mentioned in the text of the manuscript. Language The manuscript needs stylistic correction of the text. Just some examples: Wrong wording: "As described from our previous results [8], younger patients with GC had aggressive behavior and dismal prognosis." Unnecessary repetition: "The histologically confirmed GC cases in China were selected through the China National Cancer Center Gastric Cancer Database (NCCGCDB). The NCCGCDB was a clinical gastric cancer database sourced from China National Cancer Center." etc.