

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 88779

Title: Colon and rectal cancer: An emergent public health problem

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03709972

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: Italy

Manuscript submission date: 2023-10-08

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2023-12-01 12:32

Reviewer performed review: 2023-12-03 10:05

Review time: 1 Day and 21 Hours

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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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

SPECIFIC COMMENTS TO AUTHORS

#1. line 36. "his difference" >> "This difference"? #2. line 52 – 58. "it is estimated that about 65% of CRC cases develop sporadically, without any family history or predisposition to hereditary genetic mutations, occurring through somatic genomic and epigenetic alterations [4, 5]. In addition to sporadic cases, there is a smaller percentage of cases (25% of cases) with a familial association, as well as, hereditary cancer syndromes (representing only 5% of cases), and other unknown genomic alterations [2]. >> 65% sporadic and 25% familial, so how about the other 10% (=100-65 – 25)? #3. line 81. "lasts for 10-20 years" >> please provide reference[s]. #4. line 129-131. "the American Cancer Society has reinforced the role of diet and physical activity as important determinants in CRC prevention [14]" >> What was the relationship between the American Cancer Society & ref-14? #5. line 172-3 "inherited RCC syndrome, individuals whose family history suggests a genetic predisposition to RCC" >> RCC or CRC? #6. line 197 – 199 "American Joint Committee on Cancer (AJCC), is the most commonly used staging system and is based on the depth of intestinal wall invasion, the extent of regional lymph node involvement, and presence of distant sites of the disease [23]. >> Please



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double check because ref-23 was related to stomach but not colon. #7. line 212 “therapy [23].” >> Please double check because ref-23 was related to stomach but not colon. #8. line 298. Table 1? Or delete “table 1”? #9. line 324-5 “The two molecular markers most implicated in the prognosis of patients with RCC” >> RCC or CRC? #10. line 327 -8. “Deletion of chromosome 18q is associated with a worse prognosis [32].>> Please double check because ref-32 was related to renal cancer but not colon cancer. #11. line 335 “that give rise to RCC” >> RCC or CRC?

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Reviewer's code: 04723746

Position: Peer Reviewer

Academic degree: MD

Professional title: Deputy Director

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2023-10-08

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-10-29 08:25

Reviewer performed review: 2023-12-08 20:09

Review time: 40 Days and 11 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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

SPECIFIC COMMENTS TO AUTHORS

This paper provides an overview of research related to colorectal cancer (CRC). It highlights that CRC ranks third globally in terms of prevalence and second in mortality rate, with a projected doubling of incidence within the next decade. Organized screening programs exist in the United States and other European countries for people aged between 50 and 74 years old, and these measures have contributed to early diagnosis and improved health outcomes. Therefore, prevention and early diagnosis play significant roles in reducing the morbidity and mortality rates of CRC. The paper also discusses the latest scientific evidence regarding the pathology of CRC as well as its epidemiological status, and offers recommendations from a public health perspective. Some descriptions in the article are overly general, lacking concrete data support. For instance, while discussing preventive measures, it simply mentions "the need to strengthen healthy diets and regular exercise," without providing specific suggestions or data to support these opinions. The article cites some literature, but doesn't sufficiently explain or analyze them. This makes it difficult for readers to understand their importance and value. The language used in the article is somewhat stiff and awkward.



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For example, the sentence "Globally, colorectal cancer is the third most common type of cancer, and the second leading cause of death" could be expressed more concisely as "Colorectal cancer ranks third globally, with a high mortality rate." There are some errors in the text: Line 36 should read "this difference" instead of "his difference". Line 40 needs a subject before "is well-established." The picture under Figure 1 does not match the description below. Line 297 contains a mistake where "Figure 3" does not align with the image/table mentioned as "Table 1 Figure 1" below. Line 340 has a repeated word "primary". Lines 47, 53, 134, and 229 use the phrase "it is estimated that" too frequently, which could be varied for better readability. Please note that these corrections may not address every issue in the original text, additional revisions may be required.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Author's Country/Territory: Italy

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Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2023-12-25 12:43

Reviewer performed review: 2023-12-25 15:39

Review time: 2 Hours

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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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

SPECIFIC COMMENTS TO AUTHORS

The authors had addressed most of my previous comments except the below one. # section 1.3 “In this regard, the American Cancer Society has reinforced the role of diet and physical activity as important determinants in CRC prevention [17].” With ref-17 = Nutr Cancer . 2023;75(2):450-460 >> My question was that the authors of “Nutr Cancer . 2023;75(2):450-460” was not from “the American Cancer Society”, so what was the relationship between the American Cancer Society & ref-17? Was ref-17 a statement paper by the American Cancer Society”? Please clarify.