

#### PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 72457

Title: Current status of surgical management of patients with gastroenteropancreatic

neuroendocrine neoplasms

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03868151 Position: Editorial Board Academic degree: MD

**Professional title:** Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2021-10-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-26 05:31

Reviewer performed review: 2021-10-29 15:57

**Review time:** 3 Days and 10 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ <mark>Y</mark> ] Grade E: Do not publish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
Re-review	[Y]Yes [ ]No



## **Baishideng** Publishing Publishing

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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

#### SPECIFIC COMMENTS TO AUTHORS

The review is focused on step-by-step surgical management of GEP-NET, especially for liver metastasis. The surgical treatment is important in metastatic GEP-NET, and many reviews focused on this topic. This article is emphasized liver transplantation of GEP-NET and its criterias. As a review, this article is not fully including latest view and studies of surgery for liver metastasis, especially surgery of GEP-NET in extrahepatic or high grade tumor. This article has high value but structure is need revise. The introduction of GEPNET is too much and not deep enough. The article need more work to be done before qualitied to be published. 1 "NEUROENDOCRINE major NEOPLASMS OF THE PANCREAS". Heterogeneity syndrome is different category, for exsample MEN1 related PanNET has better prognosis than sporadic PanNET, the surgical management and Watch/wait of MEN1 related PanNET is different, need to re-write. 2 the table1 is not useful. 3 the introduction defined NEN be divided into NET and NEC, based on its differentiation, the surgery strategy of NET and NEC is different, and the main content in the article is about surgery treatment of NET actually, but the article use NEN in most part of the content. 4 the surgery is not limited to liver metastasis or G1/2, the latest view and studies of surgery for liver metastasis, especially surgery of GEP-NET in extrahepatic or high grade tumor, need to be mentioned. English writing is OK



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Peer-review model: Single blind

Reviewer's code: 03079453 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2021-10-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-09 09:09

Reviewer performed review: 2021-11-11 01:13

**Review time:** 1 Day and 16 Hours

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 [ Y] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

#### SPECIFIC COMMENTS TO AUTHORS

This article reviewed surgical management of GEP-NENs, including gastric, small intestin, pancreas, rectum and liver metastases. But the parts of gastric, small intestin, pancreas and rectum NENs were relative simple and repeat the points of NCCN and ENETs guldline. So I suggest that author put the emphases on liver metastases surgical management part.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03830173 Position: Editorial Board Academic degree: PhD

**Professional title:** Assistant Professor, Doctor

Reviewer's Country/Territory: Croatia

Author's Country/Territory: Poland

Manuscript submission date: 2021-10-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-09 13:11

Reviewer performed review: 2021-11-16 13:08

**Review time:** 6 Days and 23 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



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

#### SPECIFIC COMMENTS TO AUTHORS

The Title of the Manuscript Current status of surgical management of patients with gastroenteropancreatic neuroendocrine neoplasms reflects the content of the manuscript. The abstract is consise and suggests the papir will go in detail in surgical management of NETs of small intestine, rectum and pancreas, but in the main text gastric NETs are also included. The background of the manuscript is well presented in the introduction and authors discuss current surgical options. The main contribution is in summarizing curative and citoreductive options, as well as the role of liver transplantation in NEN treatment. Authors give one table- WHO classification, which I think is important but maybe not best representing the topic of the Manuscript, so I would suggest maybe more schematic summary of surgical options as a more proper graphic. In the reference list, some references are duplicated.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03738819 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2021-10-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-07 02:55

Reviewer performed review: 2021-11-16 15:11

**Review time:** 9 Days and 12 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	[ ]Yes [Y]No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

#### SPECIFIC COMMENTS TO AUTHORS

This review provided an overview of the surgical management of patients with gastroenteropancreatic neuroendocrine neoplasms. However, there are several deficiencies that need to be addressed. 1. English should be revised. 2. The manuscript lacks a discussion part, and current status and future perspectives about the surgical management of GEP-NENs should be fully discussed and concluded. 3. I recommend the authors to add a table to summarize some important clinical trials for the surgical management of GEP-NENs in this manuscript.