

ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Surgery

ESPS Manuscript NO: 5310

Title: Tumor differentiation as related to sentinel lymph node status in patients with gastric cancer

Reviewer code: 00058348

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-29 15:47

Date reviewed: 2013-09-05 02:31

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This retrospective study attempted to determine the association between sentinel lymph node status and the tumor grade of gastric cancer, but found no association. It may be true that this is the first such a study, but there are some weaknesses such as case numbers and unclear descriptions on the key outcomes. Specific comments: 1. Why was well-differentiated GC excluded from the study? 2. What generally accepted classification system was used for grading and staging the tumors and how? 3. You stated that SLNs were identified in 58/71 patients (82%), and Positive SLNs were found in 22/41 patients in group I (53.7%) and 7/17 patients in group II (42.2%). What are the definitions for "SLNs" and "positive SLNs"? How many patients were in groups I (50 or 41?) and II (21 or 17?)? 4. Statistical analysis seems too simple. 5. Discussion should focus on your major findings with highlights of the clinical significance of the findings; however, only the last paragraph is related to your findings, but it just repeats the results without any interpretation and comments on the significance of the findings.

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Name of Journal: World Journal of Gastrointestinal Surgery

ESPS Manuscript NO: 5310

Title: Tumor differentiation as related to sentinel lymph node status in patients with gastric cancer

Reviewer code: 01220668

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-29 15:47

Date reviewed: 2013-09-16 20:58

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript titled "Tumor differentiation as related to sentinel lymph node status in patients with gastric cancer" by Ron Lavy et al., was performed to investigate the tumor grade on sentinel lymph node status in patients with gastric cancer. General Comments: The paper is well written with few spelling / grammatical errors. Specific Concerns: 1. Presentation of the data is confusing. Maybe a simpler way to present the data would be as follows: Of the study patients, poorly differentiated tumors were found in 50 (70%). Of these 41 (82%) had sentinel nodes, of which 22 (54%) were positive. Conversely, moderately differentiated tumors were found in 21 (30%). Of these 17 (81%) had sentinel nodes, of which 7 (41%) were positive. 2. The percentages quoted in the text regarding the percentage of SLNs identified are in error for poorly differentiated tumors they were positive in 70.7% NOT 71.9% and negative in 29.3% NOT 28.1%) 3. Table 1 and figure 1 represent the same data. You only need to use one of them. However, the data does not match – as an example, the table states that there are 11 patients with stage 1-2 tumors in the moderately differentiate group, while the figure shows 12. All the numbers are different for each sub-group in the table compared to the figure. Weaknesses: Retrospective study. "Negative" study.

ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Surgery

ESPS Manuscript NO: 5310

Title: Tumor differentiation as related to sentinel lymph node status in patients with gastric cancer

Reviewer code: 00074724

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-29 15:47

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Tumours like other chronic non-infectious diseases are the outcome of intercommunication between genetic predispositions and environmental factors. Yet, any study examining the development and/ or prognosis of such diseases in Jewish community deserve special interest for the fact that the genetic factors in this community play stronger role than in any other communities. This will significantly help in better understanding of how tumours develop and progress. The article under review is examining the relation between the status of the sentinel lymph node to the tumour differentiation. But a question like this and on the light of the aforementioned information on the importance of any published report of that kind on Jewish population a retrospective report is not acceptable but it should be properly examined in a well designed prospective study. I, therefore, I recommend rejecting this article.