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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 79136

Title: Features of gastric cancer by anatomic subsite in northern China: a multi-center

Health Science Report (HSR) database study

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03768526 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-08-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-07 04:08

Reviewer performed review: 2022-08-13 10:12

Review time: 6 Days and 6 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 authors investigated the features of gastric cancer by anatomic location in northern China. This is an interesting and valuable article. I, the reviewer, would like you to consider the following modifications. The division of cardia, body, and antrum is an anatomical classification and is mainly diagnosed by post-mortem examination or barium meal study. However, because the shape of the stomach exhibits a three-dimensional structure and differs slightly from patient to patient, this classification is somewhat ambiguous and difficult to diagnose accurately. In particular, cardia must be handled with care, as the range of cardia varies depending on the investigator. In general, when gastric cancer is registered in databases, the occupied lesion is classified into upper, middle, and lower, which simply divides the stomach into three equal parts. In this article, it is better to use upper, middle, and lower divisions instead of cardia, body, and antrum classifications. Although calculating the cost of gastric cancer treatment is important, the calculation of the cost of surgical treatment varies considerably depending on the country, insurance system, and surgeon, so it is better to use this only as a reference. You should delete the last line of Table 2.



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Peer-review model: Single blind

Reviewer's code: 05497413 Position: Peer Reviewer Academic degree: PhD

Professional title: Academic Research

Reviewer's Country/Territory: New Zealand

Author's Country/Territory: China

Manuscript submission date: 2022-08-05

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-09-17 05:19

Reviewer performed review: 2022-09-21 07:48

Review time: 4 Days and 2 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

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

This is a good article to introduce the composition ratio characteristics and changes to gastric cancer trends based on anatomical sites in patients in northern China. There are only a few minor issues to fix: 1. The authors concluded that the patients in northern China are unique and significantly different from those in other regions, and the authors need to provide further evidence. 2. Results of the multivariate analysis were not tested. It is recommended that the authors use data from an external independent cohort of patients or other additional methods to verify the accuracy of the results. 3. The discussion section could be compressed, the author added too much introductory content to the discussion.



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Peer-review model: Single blind

Reviewer's code: 05342613 Position: Editorial Board Academic degree: FACS

Professional title: Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2022-08-05

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-09-13 06:03

Reviewer performed review: 2022-09-21 07:50

Review time: 8 Days and 1 Hour

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

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

1 Title. YES 2 Abstract. OK 3 Key words. OK 4 Background. Does the manuscript adequately describe the background, present status and significance of the study? 5 Methods. YES. SUITABLE 6 Results. THERE SHOULD BE SOME RELATIONS ABOUT TUMOR SITE, OPERATIVE PROCEDURES AND SOCIOECONOMIC CONDITIONS. 7 Discussion, WELL AND CLEAR, BUT NEEDS SOME MORE INFORMATION ABOUT TREATMENT MODALITIES AND SOCIOECONOMOC CONDITIONS OF THE PATIENTS. I THINK THAT OPERATIVE PROCEDURES MAKE THE COMPLICATION RATES DIFFERENT ?? 8 Illustrations and tables. OK 9 Biostatistics. OK 10 Units. OK 11 References. SUITABLE 12 Quality of manuscript organization and presentation. WELL 13 Research methods and reporting. SUITABLE