

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Oncology*

Manuscript NO: 65763

Title: Inflammatory bowel disease-related colorectal cancer: Past, present and future perspectives

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04123904

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: United Kingdom

Manuscript submission date: 2021-03-15

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-03-16 04:24

Reviewer performed review: 2021-03-18 10:17

Review time: 2 Days and 5 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 Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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
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
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SPECIFIC COMMENTS TO AUTHORS

In this review article, the authors focused on evolution of inflammatory bowel disease-related colorectal cancer (IBD-CRC) based on literature over the past decades to the present day and provided a comprehensive overview of risk factors associated with IBD-CRC, molecular pathways identified and current strategies used to reduce incidence globally. They also touched upon the history of surveillance practice, its effectiveness and the latest guidance on IBD surveillance by international societies. In a section on future directions they discussed introduction of novel endoscopic technologies, artificial intelligence and potential use of microbiota modulation, all of which could help reduce risk of IBD-CRC. Overall, this is a well-written article. However, the following concern needs to be addressed. Minor comment: The SCENIC international consensus statement does not recommend narrow-band imaging (NBI) as an alternative to white-light colonoscopy or dye-chromoendoscopy when performing surveillance colonoscopy in patients with ulcerative colitis. However, since the publication of this statement in 2015, several studies have been reported suggesting the utility of NBI. Please discuss on the usefulness of NBI in surveillance, referring to the following literature. References: 1. Watanabe K, et al. Comparison Between Newly-Developed Narrow Band Imaging and Panchromoendoscopy for Surveillance Colonoscopy in Patients With Longstanding Ulcerative Colitis: A Prospective Multicenter Randomized Controlled Trial, Navigator Study. *Gastrointest Endosc* 83(5S): AB172, 2016 [DOI: 10.1016/j.gie.2016.03.147] 2. Bisschops R, et al. Pit pattern analysis with high-definition chromoendoscopy and narrow-band imaging for optical diagnosis of dysplasia in patients with ulcerative colitis. *Gastrointest Endosc* 86(6): 1100-1106, 2017 [DOI:

10.1016/j.gie.2017.09.024] 3. Bisschops R, et al. Chromoendoscopy versus narrow band imaging in UC: a prospective randomised controlled trial. Gut 67(6): 1087-1094, 2018 [DOI: 10.1136/gutjnl-2016-313213]