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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 7367

Title: Prevalence and clinicopathological correlation of carcinoid in appendectomy specimens in Sharjah, United Arab Emirates (UAE)

Reviewer code: 02495270

Science editor: Su-Xin Gou

Date sent for review: 2013-11-18 16:46

Date reviewed: 2013-12-03 16:19

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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In this report, the authors describe their institutional series of appendiceal carcinoids. Article's organization should be improved (Materials and methods section is poor). Moreover, I would suggest to add also some representative examples of their findings (e.g. macroscopic examination, IHC,...).



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 7367

Title: Prevalence and clinicopathological correlation of carcinoid in appendectomy specimens in Sharjah, United Arab Emirates (UAE)

Reviewer code: 00058269

Science editor: Su-Xin Gou

Date sent for review: 2013-11-18 16:46

Date reviewed: 2013-12-09 21:08

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 checked="" 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

This study on small group (9 pts) does not any knowledge to existing data in management of this pathology.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 7367

Title: Prevalence and clinicopathological correlation of carcinoid in appendectomy specimens in Sharjah, United Arab Emirates (UAE)

Reviewer code: 02411099

Science editor: Su-Xin Gou

Date sent for review: 2013-11-18 16:46

Date reviewed: 2013-12-19 05:45

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 type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

My congratulations for the valuable work and important data retrieved. The conclusions though must be better addressed such as to give new hints to the medical community in relation to this rare pathology. discussion: you assert that one of the causes for the rise in the prevalence of carcinoids might be a rise in the number of elective appendectomies, which sounds strange to me as the indications for elective appendectomies are nowadays scarce, at least in western countries, where most appendectomies are done in the emergency setting; please explain the sentence and correlate it to bibliographic reference male prevalence in your study (9 patients) might be due to case, as the statistical significance is lacking in the conclusions you describe a higher rate of carcinoids to be higher than other studies from the same region: this should be reported in the discussion session with references and numbers (rates) in the text. YOu should better analyse the immunohistochemical asset as described in table 1 and 2 and suggest, in the conclusions, something that might be valuable for other pathologists in order not to miss carcinoids when analysing an appendectomy specimen: i.e. a standardized section in the tip to be analysed with chromogranine stain. Moreover: how many of these carcinoids were associated with slight or null inflammation of the appendix in the pathology report? is the more accurate analysis of the tip sections to be done particularly in "normal" appendectomies?



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ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 7367

Title: Prevalence and clinicopathological correlation of carcinoid in appendectomy specimens in Sharjah, United Arab Emirates (UAE)

Reviewer code: 02454257

Science editor: Su-Xin Gou

Date sent for review: 2013-11-18 16:46

Date reviewed: 2013-12-27 00:07

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 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 checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The authors present a subject of importance for the surgical community: the carcinoid of the appendix. Since the disease peak is in younger patients the early tumor stage is of utmost relevance regarding DFS (disease free survival). In general the concept of the manuscript is good. The following points of critique have to be mentioned: Close to 1,000 appendectomy specimens sounds like a large number of included cases; in the end only 9 carcinoids remain for evaluation which is insufficient for a valid statistical assessment. Given the authors describe a tertiary center a longer time-frame – like 5 years -should be chosen for evaluation. With this extended time-frame more valid results could be obtained which would increase the scientific value of the manuscript. Other available literature regarding carcinoid appendectomy presents substantially larger cohorts (please see Mullen JT, JSO 2011, Chandrasegaram MD, ANZSurg 2012). Were all carcinoids of the region evaluated, including those operated in an advanced stage, which were not an incidental finding under an appendectomy? The follow-up period is too short to provide a valid statement regarding the recurrence of the carcinoid. The introduction section is too long. The second paragraph (page 2, line 10 to 14) are not necessary. References: References 6 and 11 show the same title, same journal, edition and page numbers but different authors. This should be corrected. Minor typos should be corrected – like “adneocarcinomas” (page 2, line 5). It remains unclear why under “Ethicscommittee.doc” another version of the manuscript is to be found but not statement of the ethics committee. Taken together the here presented manuscript does have a too low scientific value. The assessment of a larger sample size would be requirement for a re-evaluation.