



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 19222
Title: Endoscopic submucosal dissection compared to laparoscopic colorectal resection for treatment of early colorectal epithelial neoplasia- a short term outcome
Reviewer's code: 00069471
Reviewer's country: Japan
Science editor: Jing Yu
Date sent for review: 2015-05-08 09:05
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Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, SCIENTIFIC MISCONDUCT, CONCLUSION. It contains checkboxes for various evaluation criteria like 'Grade A: Excellent', 'Priority publishing', 'Google Search', etc.

COMMENTS TO AUTHORS

In this study, authors compared ESD with LC for early colorectal neoplasms. Approximately 10 years have passed since colorectal ESD was developed in Japan, but the data is still lacking: which is better, ESD or LC? In that sense, this study is very valuable, and we Japanese endoscopists are partly responsible for this situation. Major comments: 1. Why were all the lesions showing Kudo's pit pattern type V excluded? As you know, type V pit pattern is divided into subgroups, and mildly irregular VI pit pattern means intramucosal carcinoma with high confidence. So lesions with mildly irregular VI can be good candidates for ESD. 2. In this study, what pathological criterion was used? Vienna classification? That is to say, was the idea of intramucosal carcinoma used? According to the manuscript, authors said, "ESD alone failed to remove 5 of the 9 malignant lesions in ESD arm." However, this sentence is somewhat misleading because this sentence could be interpreted as follows: ESD cannot resect cancer. So please clarify the criterion. Was intramucosal carcinoma not classified into 'malignancy'? Minor comments: 1. In 'The procedure of ESD and postoperative care' section, the description of 4% indigocarmine spray might be a mistake for '0.4% indigocarmine dye.'



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**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 19222

**Title:** Endoscopic submucosal dissection compared to laparoscopic colorectal resection for treatment of early colorectal epithelial neoplasia- a short term outcome

**Reviewer's code:** 02840060

**Reviewer's country:** Japan

**Science editor:** Jing Yu

**Date sent for review:** 2015-05-08 09:05

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

The authors stated ESD is superior to laparoscopic colectomy for colorectal neoplasm in regard to short-term outcome. I'm interested in the content of this article. [Major] We consider sometimes whether ESD or laparoscopic colectomy is suitable for treatment of colorectal lesions. We select generically ESD for benign lesions; if the lesions are too large to perform ESD or difficult to perform ESD because of their location, e.g. part of lesions extend ileocecal valve. In Japan colorectal adenoma 2cm in diameter is not candidate for performing laparoscopic colectomy unless regarded as special lesions. The authors should remark the above in discussion. [Minor] The term of "en bloc" is better than "en bloc". Clavien-Dino Class II is wrong. Clavien-Dingo Grade II is correct. preferred The author should change "superior than" to "superior to".