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### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 27791

Title: Gastric intestinal metaplasia is associated with gastric dysplasia but is inversely

correlated with esophageal dysplasia

Reviewer's code: 00043396 Reviewer's country: Singapore Science editor: Xue-Mei Gong

**Date sent for review: 2016-06-17 11:35** 

Date reviewed: 2016-07-05 12:38

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[Y] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[ Y] No	[ ] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ Y] No	

### **COMMENTS TO AUTHORS**

This is an interesting study which is well conducted and written.



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### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 27791

Title: Gastric intestinal metaplasia is associated with gastric dysplasia but is inversely

correlated with esophageal dysplasia

Reviewer's code: 03478686 Reviewer's country: Croatia Science editor: Xue-Mei Gong

Date sent for review: 2016-06-17 11:35

Date reviewed: 2016-06-28 20:25

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[Y] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[Y] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[ Y] No	[ ] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ Y] No	

### **COMMENTS TO AUTHORS**

This is a valuable attempt to analyze IM with the development of gastric cancer. The data obtained in this retrospective study, as well as the conclusion, require confirmation in randomized trials. Study limitations are correctly listed. It would be desirable to study and cite more recent literature on this topic (the most recent reference is from 2014).



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#### ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

ESPS manuscript NO: 27791

Title: Gastric intestinal metaplasia is associated with gastric dysplasia but is inversely

correlated with esophageal dysplasia

Reviewer's code: 02977382 Reviewer's country: China Science editor: Xue-Mei Gong

Date sent for review: 2016-06-17 11:35

Date reviewed: 2016-07-07 20:59

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ Y] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[ Y] No	[ ] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ Y] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ Y] No	

#### COMMENTS TO AUTHORS

Gastric intestinal metaplasia (IM) is a precursor to gastric adenocarcinoma. The author has done a retrospective study trying to find which clinical factors might be associated with gastric IM in a North American population. Pathology and endoscopy databases at an academic medical center were reviewed to identify patients with and without gastric IM on biopsies for a retrospective cohort study. The author finds Patients with gastric IM are at increased risk for having gastric dysplasia and cancer, and surveillance EGD with gastric biopsies in these patients might be reasonable. Question is: The author finds the mean age of 468 patients with gastric IM is 61.0 years and which of 171 without gastric IM is 48.8 years. Finally according the data, the author thinks patients with gastric IM are at increased risk for having gastric cancer. We know the morbidity of gastric cancer is higher in 60 years old persons than in 48 years old persons. How to distinguish what is the true cause of gastric cancer, gastric IM or ages?