

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 53402

Title: Preoperative C 25 and H level for prediction of high risk features in clinical stage 1 endometrial cancer patients

Reviewer's code: 03259528

Position: Editorial Board

Academic degree: CCST, FRCS (Gen Surg), MBBS

Professional title: Professor

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: Thailand

Manuscript submission date: 2019-12-20

Reviewer chosen by: Ying Dou

Reviewer accepted review: 2020-02-16 11:50

Reviewer performed review: 2020-02-16 12:22

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 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

Thanks for considering to write up this retrospective study. There is a message in the submitted article, moreover, the manuscript requires major revision with correction of grammatical errors, note that there are many fragmented statements. Attached manuscript with some suggestions. Good luck.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 53402

Title: Preoperative C 25 and H level for prediction of high risk features in clinical stage 1 endometrial cancer patients

Reviewer's code: 03478772

Position: Editorial Board

Academic degree: FACP, MD, MSc, PhD

Professional title: Assistant Professor, Attending Doctor, Chief Doctor, Doctor, Staff Physician

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: Thailand

Manuscript submission date: 2019-12-20

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-03-12 13:25

Reviewer performed review: 2020-03-12 13:58

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

My pleasure to review the manuscript. The authors have done a good job in conducting a single-institution, retrospective analysis biomarkers research in endometrial cancer patients. I have the following comments: The title should be revised as: 'Preoperative CA125 and HE4 level for prediction of high-risk features in clinical stage 1 postmenopausal endometrial cancer patients.' Page 4, Line 100: The authors have cited an outdated GLOBOCAN data. Please cite the new one published in 2018: Bray F, et al. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin. 2018 Nov;68(6):394-424. The following references should be cited and discussed. 1. Dong C, et al. Value of HE4 Combined with Cancer Antigen 125 in the Diagnosis of Endometrial Cancer. Pak J Med Sci. 2017 Jul-Aug;33(4):1013-1017. 2. Knific T, et al. Novel algorithm including CA-125, HE4 and body mass index in the diagnosis of endometrial cancer. Gynecol Oncol. 2017 Oct;147(1):126-132. 3. Stiekema A, et al. Serum HE4 is correlated to prognostic factors and survival in patients with endometrial cancer. Virchows Arch. 2017 Jun;470(6):655-664. 4. Importance of Preoperative Knowledge of the Biomarker HE4 in Early-stage Endometrial Cancer Regarding Surgical Management. 5. Presl J, et al. Importance of Preoperative Knowledge of the Biomarker HE4 in Early-stage Endometrial Cancer Regarding Surgical Management. Anticancer Res. 2017 May;37(5):2697-2702. 6. Wang Y, et al. Predictive value of serum HE4 and CA125 concentrations for lymphatic metastasis of endometrial cancer. Int J Gynaecol Obstet. 2017 Jan;136(1):58-63.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 53402

Title: Preoperative C 25 and H level for prediction of high risk features in clinical stage 1 endometrial cancer patients

Reviewer's code: 03769068

Position: Editorial Board

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Thailand

Manuscript submission date: 2019-12-20

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-03-09 13:00

Reviewer performed review: 2020-03-12 14:43

Review time: 3 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input 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

SPECIFIC COMMENTS TO AUTHORS

This is an interesting study. However, the text needs to be revised and several terms rewritten. The title of the study should reflect its main result Abstract 1) Results- "The mean age was 57.4 years; 69.5% of them were menopause." This sentence needs to be rewritten. 2) Results- "Median CA125 level was 22.1 U/ml and HE4 was 104.7 pmol/L." This sentence needs to be rewritten. 3) Results- "CA125 and HE4 levels were significantly elevated in those with large tumor size, deep myometrial invasion, lymphovascular space invasion (LVSI), extrauterine metastasis, and advance stage." Compared to which group? Introduction 1) "However, the cut-off value of HE4 was reported and varied in different studies." The studies were not cited. Methodology 1) The methodology could be divided into sections. 2) There is no mention of ethical aspects of the research. Results 1) I believe that the tables and figures could go through a formatting process.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 53402

Title: Preoperative C 25 and H level for prediction of high risk features in clinical stage 1 endometrial cancer patients

Reviewer's code: 03505676

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Thailand

Manuscript submission date: 2019-12-20

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-03-08 11:46

Reviewer performed review: 2020-03-17 07:12

Review time: 8 Days and 19 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input 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

SPECIFIC COMMENTS TO AUTHORS

In the manuscript, based on a retrospective cohort study, the authors concluded that preoperative serum CA125 (≥ 20 U/ml) or HE4 (≥ 113 pmol/L) is associated with increased risk of having high-risk features and recognized them as a prognostic factor in clinical stage 1, postmenopausal endometrial cancer patients. This is very significant for better understanding and screening the early endometrial cancer patients. However, some issues should be addressed before possible acceptance. 1. The inclusion and exclusion criteria of patients should be detailed. 2. If possible, a validation set should be used for the conclusion. 3. A differential diagnosis of endometrial cancer from colorectal cancer or ovarian cancer should be designed when applying the CA125 or HE4. 4. The authors mentioned "Normal reference value of CA125 was 0-35 U/ml and HE4 was 100-150 pmol/L."; while the cutoff values of CA125 and HE4 were respectively 20 U/ml and 13 pmol/L. How to avoid the false-positive?