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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 69253

Title: First-Line Cisplatin, Docetaxel, and Cetuximab for Patients with Recurrent or

Metastatic Head and Neck Cancer: A Multicenter Cohort Study

Reviewer's code: 03002093 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Hungary

Author's Country/Territory: Argentina

Manuscript submission date: 2021-06-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-07-06 05:31

Reviewer performed review: 2021-07-07 13:42

Review time: 1 Day and 8 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

Major As a single arm investigation of very few patients it does not give any new information even if it was a multicentric study. Very recently, a comparison of TPEx and EXTREME was published (it should be cited). How do you explain that your ORR was >10% better than that of others'? The frequency of grade 3/4 events was also very low. Presumably, it was a very selected group of patients (private care centers - with unusual, unrevealed premedications, etc.) rather than a real-world study. Why the PFS was not tested for the other variables (similarly to the type of response)? I suggest to reinvestigate PFS at least according to dose changes, tumor site, metastatic vs. advanced, previous treatments, AEs. Moreover, the median follow-up will be longer and the OS can also be reevaluated (e.g. according to the type of immunotherapy). Try to find out what were the characteristics of a real-world treatment cohort, which differed compared to trials. I could not find the institutional ethical approvals for this investigation. Minor Table 1: p16 can be omitted. Table 3: report separately grade 3 and 4. Fig. 1-3: use dot for decimal numbers at y axis. For better comparison of TPEx trials make a table.



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RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 69253

Title: First-Line Cisplatin, Docetaxel, and Cetuximab for Patients with Recurrent or

Metastatic Head and Neck Cancer: A Multicenter Cohort Study

Reviewer's code: 03002093 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Hungary

Author's Country/Territory: Argentina

Manuscript submission date: 2021-06-22

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-09-07 12:51

Reviewer performed review: 2021-09-08 06:57

Review time: 18 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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I accept your responses, except that about ethical approval. 1. The ethical approval should be included into the text, which I had not found. 2. I don't know what the requirements for multicentre testing are in your country, but you will probably need to get the approval of the national committee. Ethical approval of a single institution is not enough.