

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Oncology*

Manuscript NO: 88390

Title: Re-evaluating the role of pelvic radiation in the age of modern precision medicine and systemic therapy

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05388315

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Christmas Island

Manuscript submission date: 2023-09-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-10-17 08:17

Reviewer performed review: 2023-10-20 06:06

Review time: 2 Days and 21 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 checked="" 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

The title includes pelvic radiotherapy, but the authors only mentioned pelvic radiotherapy in locally advanced rectal cancer under this title. They presented chemotherapy and surgery as a clear treatment option for locally advanced rectal cancer, but the group that can be treated with chemotherapy and surgery alone is still very limited in the guidelines. In order not to give the wrong message to the reader, I think it would be a more accurate message if the patient group was defined as, for example, if the response to chemotherapy is >20%, there is a surgery option without RT. In addition, immunotherapy is recommended in some groups for rectal cancer, but this issue is not mentioned at all. The table is not understandable, it should be edited. Additionally, p values for the studies should be given.

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Oncology*

Manuscript NO: 88390

Title: Re-evaluating the role of pelvic radiation in the age of modern precision medicine and systemic therapy

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03723046

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Attending Doctor, Lecturer

Reviewer's Country/Territory: China

Author's Country/Territory: Christmas Island

Manuscript submission date: 2023-09-25

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-16 10:32

Reviewer performed review: 2023-11-16 13:44

Review time: 3 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous
	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors made a careful summary of evidence supporting the neoadjuvant systemic therapy without radiation. Sofar, no solid data has been achieved that only chemotherapy could take the place of chemoradiation, especially in locally advanced diseases (such as mrMRF+, or N2, or EMVI+).