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Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road, Wan Chai, Hong Kong, China

### ESPS Peer-review Report

**Name of Journal:** World Journal of Clinical Oncology

**ESPS Manuscript NO:** 8348

**Title:** Current trends in the treatment of locoregionally advanced head and neck cancer

**Reviewer code:** 00646308

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-26 15:14

**Date reviewed:** 2013-12-27 20:50

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

### COMMENTS TO AUTHORS

Fit for publication

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Clinical Oncology

**ESPS Manuscript NO:** 8348

**Title:** Current trends in the treatment of locoregionally advanced head and neck cancer

**Reviewer code:** 02493275

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-26 15:14

**Date reviewed:** 2014-01-10 07:42

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

1. The role of HPV in head and neck cancers has generated interest among various researchers in the recent past. Several good review including 1 each in seminars of radiation oncology and Lancet Oncology. The author needs to state the difference in the existing reviews and their current review. 2. The summaries of the various headings of the article has not been mentioned clearly and it has failed to deliver concrete conclusive points to the readers and is likely not be reading friendly 3. It would have been better to summarize at least some of the results in tabulated format. The article flow is very monotonous 4. The references has not been marked in the order they appear in the article as also the referencing style is erratic and has not been followed uniformly.

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Clinical Oncology

**ESPS Manuscript NO:** 8348

**Title:** Current trends in the treatment of locoregionally advanced head and neck cancer

**Reviewer code:** 02431866

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-12-26 15:14

**Date reviewed:** 2014-03-04 23:44

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

The manuscript is a nice review of HPV positive disease in terms of epidemiology, biology and clinical behavior. It has been intended to focus on current trends in treatment of locally advanced OPSCC yet the discussion of this aspect of care especially in the future direction section is rather poor. The body of the paper seems to focus on the changing trends and epidemiology, molecular and clinical behavior of HPV positive OPSCC rather than treatment of locally advanced OPSCC. The authors need to re-focus the paper on the subject at hand or else change the title and focus of the manuscript. Still the discussion of therapeutic approaches for locally advanced OPSCC especially in the future directions section is meager. The authors need to enrich that section with discussion of pros and cons of radiation only, induction therapy or using alternatives to cisplatin. Other comments: 1- The authors fail to address the fact that induction chemotherapy, alternative systemic regimens to cisplatin and other approaches have been investigated prior to the era of HPV positive disease. They need to introduce a statement to that effect (preferably in the future direction section) and justify the need to revisit these issues in the HPV positive era. 2- Specify the meaning of the 5th most common cancer in the abstract. Namely is this in incidence, in mortality and specify the region of the world 3- The grammar and language need to be improved in certain parts, 4- Would recommend mentioning the unusual patterns of distant spread that appeared in some reports (Muller S et al, HN Pathology, 2012; Ruzevick J, J Neurooncology 2013; Mc Bride SM oral Oncology 2014) 5- Would recommend moving the molecular changes section ahead of the clinical changes 6- We do not agree that OS for metastatic HPV positive and negative disease are equivalent (In the conclusive statement) as recent reports (O'Sullivan et al) indicates a longer survival for HPV



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positive group. This needs to be corrected and discussed within the context of planning concurrent therapy in light of the evidence that distant metastases may appear later in HPV positive disease and that patients with distant metastases may survive longer.