

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

ESPS manuscript NO: 16799

Title: Gastro-entero-pancreatic neuroendocrine tumors: is now time for a new approach?

Reviewer's code: 02520549

Reviewer's country: Italy

Science editor: Yue-Li Tian

Date sent for review: 2015-01-31 08:42

Date reviewed: 2015-02-10 22:21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The paper is interesting , too short foran editorial pls intensify the correlation between responses to chemo , surgical specimens and PET. The article is written from the perspective of the oncologist but could be published with more details about PET neoadjuvant therapy and surgery

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Name of journal: World Journal of Clinical Oncology

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Title: Gastro-entero-pancreatic neuroendocrine tumors: is now time for a new approach?

Reviewer's code: 02519698

Reviewer's country: United States

Science editor: Yue-Li Tian

Date sent for review: 2015-01-31 08:42

Date reviewed: 2015-02-02 06:35

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The specific role of imaging for GEP-NETs is evolving. Current NCCN guidelines recommend CT/MRI/US and somatostatin scintigraphy for select cases. Clearly the development of novel PET tracers offers promise to improve treatment for this challenging population of patients. The manuscript is a very brief overview of the emerging role of PET for GEP-NETs. I believe this editorial should be published in WJCO with revisions. 1) Although the manuscript is written from the perspective of the medical oncologist, how could PET enhance surgical treatment planning other than identifying occult metastases? 2) Can the authors summarize the data regarding sensitivity, specificity, positive predictive value and negative predictive value of PET in GEP-NETs? There should be data correlating clinical, radiologic and pathologic findings for CT, scintigraphy and PET. 3) The correlation of PET and ki-67 is interesting. However, are there actually data suggesting that PET positivity correlates with poor survival and/or response to chemotherapy? How about PET positivity and response to biologics? 4) The proposed algorithm of incorporating functional imaging is a testable hypothesis that should be formally investigated. 5) How accurate is PET in the recurrent/metastatic setting? Is there a link between PET positivity and clinical symptoms?



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

Please expand the discussion to include the following points. I would also recommend between 8 to 12 total references.

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Name of journal: World Journal of Clinical Oncology

ESPS manuscript NO: 16799

Title: Gastro-entero-pancreatic neuroendocrine tumors: is now time for a new approach?

Reviewer's code: 00061154

Reviewer's country: United States

Science editor: Yue-Li Tian

Date sent for review: 2015-01-31 08:42

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The English needs a good deal of editing. The findings of the 3 studies noted should be put into a table for comparison.