

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

Ms: 3500

Title: Molecular targeting therapy using bevacizumab for peritoneal metastasis from gastric cancer

Reviewer code: 02493161

Science editor: x.x.song@wjgnet.com

Date sent for review: 2013-05-03 16:27

Date reviewed: 2013-05-07 04:34

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"/> [Y]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

COMMENTS TO AUTHORS:

The data are not well certified by histopathology and immunohistochemistry. NO convincing differences have been observed between treated and non treated groups. Lack of VEGF receptors assesement decrease the value of the present study.

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

Ms: 3500

Title: Molecular targeting therapy using bevacizumab for peritoneal metastasis from gastric cancer

Reviewer code: 00069467

Science editor: x.x.song@wjgnet.com

Date sent for review: 2013-05-03 16:27

Date reviewed: 2013-05-10 12:58

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 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

General comments Aoyagi K and colleagues reported that they have been in an attempt to mitigate the carcinomatosis of nude mice model with peritoneal dissemination of gastric cancer using Bevacizumab in a proposed VEGF-suppressing way, and through experimental design and performance finally they found they make it, suggesting that Bevacizumab may be used in the clinical curing and management of patients with peritoneal dissemination of gastric cancer. While this is an important and interesting finding, there are some questions and limitations which preclude it from publication in WJCCM. Major concerns (1) It is really hard to interpret the meaning of the experiment section in which measurement of cytokines in conditioned medium, in the current form of manuscript provided. According to the hypothesis of the authors, cytokines especially including VEGF and so on should have been measured in ascites before and after therapy with Bevacizumab, as opposed to measurement in conditioned medium. Also, the authors haven't made any relevant discussion upon this in discussion section. (2) Necessary control is missing in the proving that VEGF is essential element in the development of peritoneal metastasis, as stated in the discussion section. To prove the importance of VEGF, MKN-45 cell line whose secreted VEGF in culture medium was pronounced lower than that of MKN-45P, should have been included as control group in the modeling of nude mice with peritoneal metastasis of gastric cancer to observe the tumorigenesis difference in comparison with MKN-45P. (3) The authors claimed more than thrice that Bevacizumab might suppress the vascular permeability effect and cell proliferative activity by inhibiting angiogenesis of VEGF in discussion part in the absence of evidence-based results in the current study.

Please provide direct evidence regarding how Bevacizumab works on vascular permeability and cell proliferation if possible, or should have been omitted. (4) The authors made great efforts to analyze the pathology of kidneys of nude mice; however, authors didn't relate cause-and-effect relationship of kidney in the curing of peritoneal metastasis using Bevacizumab. Further, the authors haven't made any discussion or comments on why they analyze the pathological changes of kidney while doesn't analyze other drug detoxicatory organ, say, liver? Minor concerns (1) The authors conducted experiment using nude mice without mentioning that whether the current study is approved or not by the local animal care and use committee of Ethics. Please clarify. (2) How much the successful rate of model with peritoneal dissemination? that should be stated. (3) With respect to the working concentration of Bevacizumab, how determined? (4) The discussion is wordy and too long, it is hard to understand and read. Suggest re-write it. (5) There are some grammatical errors that can be easily perfected on additional scrutinizing. Specific points (1) Figure 1B. Tumor nodules on the mesentery should have been labeled using arrows or other symbols to make clear for the readers. (2) The same holds true for Figure 2. Some necessary labels should have been added on figures to point out where the metastatic tumors are, and the subtitle of figure 2C is also missing. These findings seem peripheral to the main story and might perhaps be omitted from manuscript without losing much. If the data remains in it needs to be reinforced and discussed significantly. (3) Figure 3. Please provide slide staining on normal group (given with drug-free saline). Please use appropriate remarkable symbols to point where you want and what you want. Also, please provide the quantitative analysis of these qualitative results. (4) Figure 4. Please provide slide staining on normal group with saline. Also, please provide the quantitative analysis of these qualitative results. (5) Figure 5. The number of cases of each group should have been included in the figure 5.

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

Ms: 3500

Title: Molecular targeting therapy using bevacizumab for peritoneal metastasis from gastric cancer

Reviewer code: 02493052

Science editor: x.x.song@wjgnet.com

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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 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

This study reported to clarify the significance of vascular endothelial growth factor (VEGF) in peritoneal metastasis from gastric cancer, using the gastric cancer cell line MKN-45 compared with the high-potential peritoneal dissemination gastric cancer cell line MKN-45P. This study was very interesting. Major revise 1: You examined The concentrations of interleukin-6 (IL-6), IL-8, VEGF and matrix metalloproteinase-2 (MMP-2) protein in the culture supernatant. This study revealed the relation VEGF and Bevacizumab, but never commented about the relation interleukin-6 (IL-6), IL-8, and matrix metalloproteinase-2 (MMP-2). We think this issue must be examined and discussed. 2: How about the levels of interleukin-6 (IL-6), IL-8, VEGF and matrix metalloproteinase-2 (MMP-2) protein after therapy? Whether are interleukin-6 (IL-6), IL-8, VEGF and matrix metalloproteinase-2 (MMP-2) decreased? You must revealed this issue.

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

Ms: 3500

Title: Molecular targeting therapy using bevacizumab for peritoneal metastasis from gastric cancer

Reviewer code: 02451548

Science editor: x.x.song@wjgnet.com

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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
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<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS

COMMENTS TO AUTHORS:

This article investigated that VEGF was correlated with peritoneal metastasis from gastric cancer and suggested that bevacizumab suppress peritoneal dissemination from gastric cancer. I'm interested in this article and I believe this article is useful for readers.