



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
**https://www.wjgnet.com**

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 86635

**Title:** Predicting Lymph Node Metastasis in Colorectal Cancer: An Analysis of Influencing Factors and Risk Model Development

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06540813

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-08-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-08-18 09:51

**Reviewer performed review:** 2023-08-30 08:38

**Review time:** 11 Days and 22 Hours

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 Grade E: Do not publish |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



|   |  |
|---|--|
| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance   |
| <b>Language quality</b>   | <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 |
| <b>Conclusion</b>   | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection          |
| <b>Re-review</b>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |
| <b>Peer-reviewer statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous<br>Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |

#### SPECIFIC COMMENTS TO AUTHORS

It's a retrospective study that attempts to construct a risk prediction model for predicting CRC lymph node metastasis. Although the manuscript provides valuable insights and innovations, there are some issues that may need further attention, as follows: 1. The article mentions that the study was conducted at two hospitals, but the conclusion describes a "single-center background," which may be contradictory. 2. In line 15 on page 6, the authors used LNM as the outcome variable and 16 predictors, however, they only listed "age, gender, tumor positioning, size, differentiation, depth of invasion, lymphovascular invasion, perineural invasion, tumor budding, and the frequency of the top ten clusters. "A total of 10 predictors, is it a descriptive error? 3. It is suggested to add a flow chart for the division of the study population to present it more clearly. 4. There are two \*\* symbols in Table 3, but there is no explanation for this symbol, please add. In addition, the logic of the article is very clear and can be published after addressing the aforementioned issues.



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 86635

**Title:** Predicting Lymph Node Metastasis in Colorectal Cancer: An Analysis of Influencing Factors and Risk Model Development

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06110697

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Research Dean

**Reviewer's Country/Territory:** Sweden

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-08-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-08-21 08:21

**Reviewer performed review:** 2023-08-30 10:04

**Review time:** 9 Days and 1 Hour

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



|   |  |
|---|--|
| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance   |
| <b>Language quality</b>   | <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 |
| <b>Conclusion</b>   | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection          |
| <b>Re-review</b>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |
| <b>Peer-reviewer statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous<br>Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |

#### SPECIFIC COMMENTS TO AUTHORS

Overall, this article is well written. Yun-peng Lei et al. conducts a retrospective study on rectal cancer patients in two Peking University Shenzhen hospitals and constructs and analyzes a risk prediction model for predicting CRC lymph node metastasis. This model has more predictive factors than the other three existing models (Kikuchi's model, Ueno's model, Krogue's model), indicating that it may be more sensitive in prediction. However, there are still some limitations due to factors such as a small sample size. The article has a clear logical structure, providing a detailed introduction to the materials and methods of the prediction model. The value of this research is also explained, and the limitations of the study are clearly stated at the end of the article. The Figures and Tables in the article are well-summarized and visually intuitive. Overall, this study is highly readable. There is a minor suggestion: since the focus of the article is on the analysis and construction of the model, there is relatively little information about treatment strategies. It is recommended to remove the term "treatment strategies" from the keywords. Thank you for giving me the opportunity to review this study.



**Reviewer #1:**

**Specific Comments to Authors:** Overall, this article is well written. Yun-peng Lei et al. conducts a retrospective study on rectal cancer patients in two Peking University Shenzhen hospitals and constructs and analyzes a risk prediction model for predicting CRC lymph node metastasis. This model has more predictive factors than the other three existing models (Kikuchi's model, Ueno's model, Krogue's model), indicating that it may be more sensitive in prediction. However, there are still some limitations due to factors such as a small sample size. The article has a clear logical structure, providing a detailed introduction to the materials and methods of the prediction model. The value of this research is also explained, and the limitations of the study are clearly stated at the end of the article. The Figures and Tables in the article are well-summarized and visually intuitive. Overall, this study is highly readable. There is a minor suggestion: since the focus of the article is on the analysis and construction of the model, there is relatively little information about treatment strategies. It is recommended to remove the term "treatment strategies" from the keywords. Thank you for giving me the opportunity to review this study.

Removed the term "treatment strategies" from the keywords to better align with the focus of the article

**Reviewer #2:**

**Specific Comments to Authors:** It's a retrospective study that attempts to construct a risk prediction model for predicting CRC lymph node metastasis. Although the manuscript provides valuable insights and innovations, there are some issues that may need further attention, as follows: 1. The article mentions that the study was conducted at two hospitals, but the conclusion describes a "single-center background," which may be contradictory. 2. In line 15 on page 6, the authors used LNM as the outcome variable and 16 predictors, however, they only listed "age, gender, tumor positioning, size, differentiation, depth of invasion, lymphovascular invasion, perineural invasion, tumor budding, and the frequency of the top ten clusters. "A total of 10 predictors, is it a descriptive error? 3. It is suggested to add a flow chart for the division of the study population to present it more clearly. 4. There are two \*\* symbols in Table 3, but there is



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
**https://www.wjgnet.com**

no explanation for this symbol, please add. In addition, the logic of the article is very clear and can be published after addressing the aforementioned issues.

- 1.Removed the "single-center background" to eliminate the discrepancy with the study being conducted at two hospitals.
- 2.Corrected the descriptive error on page 10, line 15, to accurately list all 10 predictors used in the study.
- 3.Added a flow chart to more clearly present the division of the study population.
- 4.Removed the \*\* symbols in Table 3 as they were not necessary for the interpretation of the table.