



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 101150

**Title:** Rectal neuroendocrine tumors: Can we predict their behavior?

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

**Peer-review model:** Single blind

**Reviewer's code:** 01588784

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2024-09-05

**Reviewer chosen by:** Jia-Lin Zhang

**Reviewer accepted review:** 2024-11-07 12:22

**Reviewer performed review:** 2024-11-08 10:56

**Review time:** 22 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<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 <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 <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 <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input 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
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

The authors wrote a well written, concise editorial to a retrospective, multicenter study entitled “GATIS score for predicting the prognosis of rectal neuroendocrine neoplasms: A Chinese multicenter study of 12-year experience”, which was dedicated by Zeng XY et al. and was published in the World Journal of Gastroenterology 28; 30: 3403-3417. The editorial itself is non-structured: however, the contents of the manuscript present a highly organized one, comprised of introduction, body (discussion), and conclusion. The collected references were mostly derived from up-to-date articles with highly reputable journals. The introduction commenced at a short summary of endoscopic and histologic features of rectal neuroendocrine tumors (r-NETs), followed by the classification (grading/staging) and prognosis. In the body section, the authors briefly reviewed the concept, method, and results of the proposed GATIS score, which analyzed the predictive value of clinicopathological features on patients’ prognosis. By incorporating numerous variables including tumor grade, T stage, tumor size, age, and prognostic nutritional index (PNI), the GATIS score provided a more accurate prediction of survival outcomes compared to WHO grading and TNM staging. However, the authors pointed



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out the possible drawback of this study, including relatively short follow-up period (the median of 34 months), the lack of incorporating genetic/molecular markers, and population bias (participants were recruited from China, although a large number of patients were finally analyzed). In particular, the authors emphasized the need for further research on identifying biomarkers, because histopathological and molecular evaluation provides more valuable prognostic insights, in the era of tailored and personalized medicine. In the conclusion section, the authors commented that the GATIS score is an innovative prediction model that facilitates stratifying patients with r-NETs. Certainly, the results of this study should be re-evaluated in further, larger prospective research. Further, international, multicentric prospective studies will be organized by the communities of researchers dedicated to r-NETs.



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**Reviewer's code:** 02440510

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Bosnia and Herzegovina

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

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**Reviewer accepted review:** 2024-11-10 19:03

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**Review time:** 3 Hours

<b>Scientific quality</b>	<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
<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 <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 <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 <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 checked="" type="checkbox"/> Accept (General priority) <input 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
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

Manuscript Number: WJG-24-101150, titled „Rectal Neuroendocrine Tumors: can we predict their behavior? “. In their editorial, the authors commented the manuscript "GATIS score for predicting the prognosis of rectal neuroendocrine neoplasms: A Chinese multicenter study of 12-year experience", published in Volume 30 (28) of the World Journal of Gastroenterology. The GATIS prognostic score analyzes the relationship between clinico-pathological features and patients’ prognoses for rectal neuroendocrine tumors. This editorial proposes the GATIS score, as an innovative model designed to predict individualized survival outcomes in patients with rectal neuroendocrine tumors. Although the manuscript emphasizes the importance of prognostic results for the diagnosis and prediction of outcomes in rectal neuroendocrine tumors, in the conclusion authors highlight the need for additional prognostic factors (such as genetic and molecular markers) that need to be further elaborated through randomized clinical trials and meta-analyses. General Comments: The authors addressed a very current and important topic, focusing on prognostic factors used to assess the risk of lymph node and distant metastases in r-NETs, including lesion size,



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tumor grading, staging, and lymphovascular invasion. In this context, the authors analyze the GATIS prediction score, proposed by Zang and colleagues, noting that this score represents an innovative model designed to predict individualized survival outcomes, taking into account grade, stage and size of changes, along with clinical variables such as age and prognostic nutritional index. The study also has implications for clinical practice because rectal neuroendocrine tumors are the second most common type of neuroendocrine tumor in the gastrointestinal tract, with increasing incidence due to improved colonoscopy techniques and expanded use of colon cancer screening programs. Histology often reveals low-grade tumors, so they have a favorable prognosis with indolent behavior. The study is well designed, the literature is well selected and correctly interpreted, the advantages and disadvantages of the study by Zang and colleagues are clearly presented and their importance in the context of literature data is clearly highlighted, with adequate and consistent conclusions.