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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11390

Title: Role of CT and MRI for evaluation of lymph node metastasis in early colorectal cancer

Reviewer code: 02571990 Science editor: Su-Xin Gou

Date sent for review: 2014-05-19 19:07

Date reviewed: 2014-05-20 20:40

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

I think is a good paper. I have some suggestions, first of all I will reduce the size of the abstract.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11390

Title: Role of CT and MRI for evaluation of lymph node metastasis in early colorectal cancer

Reviewer code: 02569554 Science editor: Su-Xin Gou

Date sent for review: 2014-05-19 19:07 **Date reviewed:** 2014-05-25 13:22

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

The Material & method paragraph from the Abstract is too large. In my opinion it has to be revised and reduced.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11390

Title: Role of CT and MRI for evaluation of lymph node metastasis in early colorectal cancer

Reviewer code: 02562428 Science editor: Su-Xin Gou

Date sent for review: 2014-05-19 19:07

Date reviewed: 2014-05-30 09:26

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade A (Excellent)	[1] Grade A. Friority Fublishing	Google Search.	[]Accept
[Y] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[Y] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

In this paper the authors conducted a retrospective study to probe the role of CT and MRI for evaluation of lymph node metastasis in early colorectal cancer. They concluded that the short diameter size criteria of ≥4.1mm for lymph nodes was optimal for nodal staging in early colorectal cancer. Their results are instructive, but the biases caused by retrospective study such as the measurement bias should be discussed more detailed in the discussion.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 11390

Title: Role of CT and MRI for evaluation of lymph node metastasis in early colorectal cancer

Reviewer code: 02569704 Science editor: Su-Xin Gou

Date sent for review: 2014-05-19 19:07 **Date reviewed:** 2014-06-02 12:34

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[Y] Grade D (Fair)	language polishing	BPG Search:	[Y]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

It is difficult that metastatic lymph nodes of colorectal cancer are diagnosed by CT or MRI. The conventional size criteria that the lymph node with the short diameter size of more than 7mm or 10mm is metastatic lesion was reported that it's diagnostic accuracy is low. It is reported that not only the size, lymph node metastasis diagnostic power is improved by its shape and radiological finding. In this study, the sample size is small; this is not a universal indicator. In addition, I have no idea why can you diagnose that metastatic lymph nodes are the short diameter size of more than 4.1mm with 5mm slice CT and/or MRI.