



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 113550

Title: Capecitabine maintenance after radiofrequency ablation: A preventive strategy for lung oligometastases from colorectal cancer

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 08020969

Position: Peer Reviewer

Academic degree and professional title: PhD, Senior Scientist

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2025-08-27

Reviewer chosen by: Jia-Lin Zhang

Reviewer accepted review: 2025-09-11 01:53

Reviewer performed review: 2025-09-19 15:25

Review time: 8 Days and 13 Hours

Content to be reviewed	Does the manuscript's content fall within the scope of the journal? Yes Is there any Key Word that is not included in the manuscript title? No Do authors' affiliations correspond to the content of the manuscript? Yes Does the Abstract contain the contents of each part of the manuscript (IMRaD)? Yes Are the Key Words complete? Yes
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Is the content of the Introduction adequate? **Yes**

Is the content of the Materials and Methods complete?
Not Applicable

Is the description of the experiments clear and complete? **Not Applicable**

Are the experimental data presented in the manuscript's biostatistics content reliable? **Not Applicable**

Are the experimental data of the Results true and reliable? **Not Applicable**

Are the quality and resolution of the images up to standard? **Not Applicable**

Do the selection and design of the figures and tables follow the principles of necessity and clarity? **Not Applicable**

Is there any duplication between various parts of the manuscript and between the main text and the content presented in the figures and tables? **No**

Are the figures and tables numbered consecutively in the order in which they appear in the manuscript? **Yes**

Is the content of the Discussion reasonable? **Yes**

Is the Conclusion reasonable? **Yes**

Are all references necessary and reasonable? **Yes**

Do authors omit important references? **No**

Are all references related to the topic of the manuscript? **Yes**

Do authors only cite their own earlier publications? **No**

Is the manuscript's text correct, concise, and clear? **Yes**

Will the manuscript's content be of interest to readers?
Yes



	Are additional experiments needed for the study? No Does the research scope comply with ethics? Not Applicable
Scientific quality	Grade B (Very good)
Novelty of this manuscript	Grade C (Good)
Creativity or innovation of this manuscript	Grade C (Good)
Scientific significance of the conclusion in this manuscript	Grade C (Good)
Language quality	Grade A (Excellent)
Does this manuscript describe a study of the existing knowledge system?	Yes
Does this manuscript report a revolutionary innovation?	No
Does this manuscript report an unconventional innovation?	No
Conclusion	Major revision
Re-review	Yes
Peer-reviewer statements	Peer-Review: Anonymous
	Conflicts-of-Interest: No
Are your review comments generated by AI tools?	No

SPECIFIC COMMENTS TO AUTHORS

This letter introduces a study on the combination of radiofrequency ablation (RFA) and capecitabine maintenance therapy in patients with colorectal cancer and pulmonary oligometastasis, which resulted in higher five-year overall survival (OS) and five-year local tumor progression rate. This indicates that capecitabine can effectively remove



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residual micro metastases after radiofrequency ablation, which helps to control tumor progression. This provides guidance for clinical treatment, but the rigor of the argument is insufficient and further improvement and supplementary evidence are needed.

1.The relevance of this issue to prevention is low. It is recommended that the author change the title to be more relevant to the topic.

2.The cited references are not comprehensive and specific enough, and the explanation of the purpose is not clear enough to fully demonstrate the uniqueness and importance of this study. Further improvement and emphasis are needed in this issue.

3.The article only mentions the research results of Li et al (World J Gastroenterol 2025; In press), which have randomness and population differences. Can the author supplement multi-center clinical research cases.

4.The safety and applicability of adding capecitabine for maintenance therapy after radiofrequency ablation need further investigation, which is important for practical clinical application. In addition, is there an alternative plan for maintaining capecitabine treatment.

5.What is the mechanism by which capecitabine can effectively remove residual micro metastases after radiofrequency ablation, and can the author further elaborate on it. Is a similar treatment strategy feasible for cancers other than colorectal cancer, or for cases where colorectal cancer has oligometastases to organs other than the lungs.

6.A brief description of the clinical information of the samples included in the study is required. It needs to reduce the preference for age, gender, personal disease history, treatment history, etc. among patients in different groups.

7.I suggest the author to provide an objective analysis of the limitations of this issue.



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Reviewer's code: 08573106

Position: Peer Reviewer

Academic degree and professional title: Director, MD

Reviewer's Country/Territory: India

Author's Country/Territory: Italy

Manuscript submission date: 2025-08-27

Reviewer chosen by: Jia-Lin Zhang

Reviewer accepted review: 2025-09-24 04:27

Reviewer performed review: 2025-09-24 06:01

Review time: 1 Hour

Content to be reviewed	Does the manuscript's content fall within the scope of the journal? Yes Is there any Key Word that is not included in the manuscript title? No Do authors' affiliations correspond to the content of the manuscript? Yes Does the Abstract contain the contents of each part of the manuscript (IMRaD)? No Are the Key Words complete? Yes
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Do authors omit important references? **No**

Do authors only cite their own earlier publications? **Yes**

Is the manuscript's text correct, concise, and clear? **Yes**

Will the manuscript's content be of interest to readers?
Yes

Are additional experiments needed for the study? **Yes**



	Does the research scope comply with ethics? Yes Are all references related to the topic of the manuscript? Yes
Scientific quality	Grade C (Good)
Novelty of this manuscript	Grade C (Good)
Creativity or innovation of this manuscript	Grade E (Do not publish)
Scientific significance of the conclusion in this manuscript	Grade C (Good)
Language quality	Grade C (Good)
Does this manuscript describe a study of the existing knowledge system?	Yes
Does this manuscript report a revolutionary innovation?	No
Does this manuscript report an unconventional innovation?	No
Conclusion	Minor revision
Re-review	Yes
Peer-reviewer statements	Peer-Review: Anonymous
	Conflicts-of-Interest: No
Are your review comments generated by AI tools?	No

SPECIFIC COMMENTS TO AUTHORS

While the manuscript addresses a clinically important topic the prevention of recurrence in colorectal cancer lung oligometastases through the combination of radiofrequency ablation (RFA) and capecitabine maintenance therapy I have several concerns that limit its suitability for publication.



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First, the primary weakness of the submission lies in its lack of originality. The letter largely restates and summarizes the findings of Li et al. without offering substantial new insights, hypotheses, or data. A Letter to the Editor is expected to extend discussion by providing critical appraisal, highlighting overlooked limitations, or raising novel clinical or scientific considerations. In its present form, the manuscript does not move beyond reiteration of already-published results, which diminishes its value to the readership.

Second, the critique of the cited study's limitations is minimal. Although the author notes the retrospective design, the discussion of weaknesses such as patient selection bias, heterogeneity in treatment modalities, lack of prospective validation, and potential confounding variables is superficial at best. A more thorough appraisal of these issues would have given the letter a stronger critical dimension. Without deeper evaluation, the manuscript reads more as a summary than a meaningful academic commentary.

Third, the presentation has stylistic and structural shortcomings. The abstract is unusually long for a Letter to the Editor and adopts a research-style IMRaD format rather than a concise, focused summary. The tone is at times overly promotional (e.g., "prevention is profoundly more effective than cure"), which detracts from the scientific neutrality expected in academic correspondence. Streamlining the text to eliminate redundancy and ensuring a more objective tone would be necessary for any potential revision.

Fourth, although the references are current and relevant, they do not add a unique perspective. The author has not identified overlooked studies or synthesized the evidence in a way that provides fresh interpretation. This further limits the manuscript's contribution.

In summary, while the clinical question addressed is highly relevant, the manuscript does not achieve the originality, critical depth, or scholarly contribution expected for publication in the World Journal of Gastroenterology. It provides little beyond what has



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already been published and lacks the analytical rigor needed to justify acceptance.