

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15171

Title: Vanek's tumor of small bowel in adults.

Reviewer's code: 03026822

Reviewer's country: Italy

Science editor: Jing Yu

Date sent for review: 2014-11-14 10:33

Date reviewed: 2015-01-16 02:37

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a very accurate review dealing with an interesting topic and authors should be commended. IFPs are in fact rare neoplasms not so well known by a lot of surgeons and gastroenterologists. Title accurately reflects the major topic and content of the study. Abstract provides a clear delineation between the research background and results of the review. Results provide evidence actually found in literature. References are appropriate, relevant, and up-to-date. I have only some considerations and questions: 1) in "Definitions" section, line 1: "IFPs are rare...non-neoplastic lesions". I think it is not correct to define IFPs as non neoplastic lesions. It's a semantic problem I suppose, but by definition a "neo-plasia" indicates a new proliferation and it must be distinguished by hyperplasia, in absence of cellular atypias, mainly for loosing architectural structure of tissues involved. Describing the histology of IFPs authors state that fibroblasts form a confused or whirl-like structure around a blood vessel. So I think IFPs should be defined as benign neoplastic lesions. 2) IFPs arise from the submucosa. Authors write that most of them can be successfully treated by endoscopy. Which kind of endoscopic excision is correct? Is it sufficient an endoscopic mucosal resection or an endoscopic submucosal dissection is required? Are there differences between sessile and



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

peduncolated lesions? 3) Which is the best therapeutic strategy for a small, asymptomatic IFP incidentally found and not easy to remove by endoscopy? Is surgical intervention mandatory or a strict FU can be sufficient? Is there a dimensional cut-off to decide?



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Fax: +1-925-223-8243

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ESPS PEER-REVIEW REPORT

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input checked="" type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Interesting review of a rare tumour of the gastrointestinal tract, known for long as “hemangiopericytoma”. Though the interest for this rather rare tumour can be debated, it is important to maintain the awareness of clinicians about this possibility. It is worth mentioning early in the introduction that Vanek’s tumour is frequently asymptomatic. Also, it is suggested that immunohistochemical analysis seem to indicate a possible relation between Vanek’s tumour and actin, desmin, CD34, CD 117 and S100, and this is also worth mentioning in a review.



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8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER-REVIEW REPORT

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<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is an interesting review study about a kind of "forgotten" pathology of the intestinal tract. The article is well organized and easily readable. The bibliography seems up-to-date. I suggest to authors to introduce earlier within the text the meaning of PDGFRA (that only appears in section 3). In section 7, first sentence should be removed as it is exactly the same as the one introducing previous section. It could be useful to have some illustration of the different imaging technics described for identification of Vanek's tumor. Especially with CT, MRI and Videocapsul