PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 78939

Title: Predictive value of indirect bilirubin before neoadjuvant chemoradiotherapy in evaluating prognosis of local advanced rectal cancer patients

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 06280646

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer’s Country/Territory: Italy

Author’s Country/Territory: China

Manuscript submission date: 2022-07-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-24 21:00

Reviewer performed review: 2022-07-24 21:01

Review time: 1 Hour

Scientific quality

[ ] Grade A: Excellent  [Y] Grade B: Very good  [ ] Grade C: Good
[ ] Grade D: Fair  [ ] Grade E: Do not publish

Language quality

[ ] Grade A: Priority publishing  [Y] Grade B: Minor language polishing
[ ] Grade C: A great deal of language polishing  [ ] Grade D: Rejection

Conclusion

[ ] Accept (High priority)  [Y] Accept (General priority)
[ ] Minor revision  [ ] Major revision  [ ] Rejection

Re-review

[ ] Yes  [Y] No
SPECIFIC COMMENTS TO AUTHORS
This topic is attractive for the oncological community. The manuscript is well written. In my opinion, the manuscript may be suitable for publication.
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Title: Predictive value of indirect bilirubin before neoadjuvant chemoradiotherapy in evaluating prognosis of local advanced rectal cancer patients

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03805385

Position: Peer Reviewer

Academic degree: FASCRS, MD, PhD

Professional title: Assistant Professor, Attending Doctor, Doctor, Medical Assistant, Postdoctoral Fellow, Research Associate, Senior Research Fellow, Surgeon

Reviewer’s Country/Territory: Brazil

Author’s Country/Territory: China

Manuscript submission date: 2022-07-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-06 13:46

Reviewer performed review: 2022-08-06 14:10

Review time: 1 Hour

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<td>Grade D: Rejection</td>
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Conclusion

[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
SPECIFIC COMMENTS TO AUTHORS
Thank you so much for the opportunity to review this paper: Predictive value of the indirect bilirubin in evaluating the prognosis of local advanced rectal cancer patients treated with neoadjuvant chemoradiotherapy. I have some comments:  
Introduction: I understand the concept, but if you can, explain the pathophysiology of the indirect bilirubin and the rectal cancer. Methodology: Why long course neoadjuvant treatment only? Exclusion criteria: please re-phrase. Also, the sentence: 3) malignant tumors occurred at other sites at the same time. Could be changed for synchronous tumor. How many weeks was the interval between the end of neoadjuvant treatment and surgery? Results: why the Pre-IBIL number was fixed in ≤6.2 umol/L? Conclusion: Please rephrase, in your study, with the limitations and the retrospective nature, you found an association between a blood sample and oncological outcomes in patients with rectal cancer.
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Title: Predictive value of indirect bilirubin before neoadjuvant chemoradiotherapy in evaluating prognosis of local advanced rectal cancer patients

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03270518

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor, Professor, Surgeon, Teacher

Reviewer’s Country/Territory: Italy

Author’s Country/Territory: China

Manuscript submission date: 2022-07-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-07 09:56

Reviewer performed review: 2022-08-16 08:18

Review time: 8 Days and 22 Hours

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<td>Re-review</td>
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SPECIFIC COMMENTS TO AUTHORS
Specify in the title of the work that the indirect bilirubin considered is the one before nCRT. Update, if possible, the bibliography (there are no works from 2021 and 2022).