



ESPS Peer-review Report

Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 7428

Title: Esophageal Cancer: A Review of Epidemiology, Pathogenesis, Staging Workup and Treatment Modalities

Reviewer code: 02445538

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-18 12:44

Date reviewed: 2013-11-25 13:32

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, RECOMMENDATION, CONCLUSION. It lists various grades (A-E) and their corresponding language evaluation, search results (Google/BPG), and conclusions (Accept, High priority, Rejection, Minor revision, Major revision).

COMMENTS TO AUTHORS

Napier and Mary Scheerer et al. extensively reviewed on epidemiology, pathogenesis, staging work-up and treatment modalities of esophageal cancer. Although the manuscript is well demonstrated, it needs to be modified in some degree. The following points should be addressed. Major comments: 1. As the authors review in the article, epidemiology and pathogenesis are different between squamous cell carcinoma (SCC) and adenocarcinoma of the esophagus. Similarly, diagnostic modality including FDG-PET, tumor markers, prognostic factors and treatments are also different between these 2 entities. The authors should separately review them in each cancer. 2. The authors should cite more systematic reviews or meta-analyses in the text. Minor comments; 1. Page 1, the 1st sentence in the "Epidemiology": the authors described that worldwide SCC is the most prevalent histological type of esophageal cancer, while in certain developed nations including Australia, Finland, France, USA and United Kingdom adenocarcinoma of the esophagus predominates by citing ref #7. However, I could not find any descriptions on the incidence of EAC in "Finland" in this article. Could you check this article (ref. #7) they cited? 2. Page 2: In the "Pathogenesis of Squamous Cell Carcinoma" section: please describe regarding ALDH2 and ADH1B genotypes, which are associated with the pathogenesis of SCC. 3. Page 3, the last sentence in 1st paragraph: the authors described the annual incidence of EAC (0.12%) in patients with Barrett's esophagus (BE). Is it true? As the authors know, there are several systematic reviews and meta-analyses on EAC risk in BE patients. The presence or absence of specialized intestinal metaplasia and dysplasia at baseline may influence the incidence of EAC during follow-up. Please revise the sentences and discuss on this matter. 4. Page 7,



## Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road, Wan Chai, Hong Kong, China

---

the “Tumor markers” section: Commonly, tumor markers such as SCC (squamous cell carcinoma-associated antigen), CEA (carcinoembryonic antigen) or CYFRA (cytokeratin-19 fragments) have low sensitivity and specificity for the diagnosis of ESCC or EAC. After mentioned on this general information, the authors should describe other tumor markers such as H2 RLN and WDR66. 5. Page 9, 3rd paragraph: Please change “EMD” to “ESD”. 6. Page 9, 3rd paragraph: Please change “conjunction” to “conjunction”. 7. Please revise all the references according to instructions to authors. Please add “2003” in ref. #74. 8. Please unify the term “esophageal carcinoma” to “esophageal cancer”. 9. Abbreviations should be defined on first mention in the text.



# Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road, Wan Chai, Hong Kong, China

## ESPS Peer-review Report

**Name of Journal:** World Journal of Gastrointestinal Oncology

**ESPS Manuscript NO:** 7428

**Title:** Esophageal Cancer: A Review of Epidemiology, Pathogenesis, Staging Workup and Treatment Modalities

**Reviewer code:** 00045997

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-11-18 12:44

**Date reviewed:** 2013-12-04 15:58

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input 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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Thank you very much for having me this opportunity to review this paper. This is an excellent paper with a high clinical relevance according to esophageal cancer. Major Tumor markers, predictive factors and treatment section should be described separately about SCC and EAC. FDG-PET could show different detectability between SCC and EAC. Minor 1. I wonder if you could add some descriptions about endoscopic findings using iodine spray or narrow band imaging, because it seems very informative for readers. 2. Reference style doesn't seem consistent with the journal instruction. Please make sure.