



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Methodology*

**Manuscript NO:** 92267

**Title:** Novel Automated Non-Invasive Detection Of Ocular Surface Squamous Neoplasia Using Artificial Intelligence

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 07302593

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** India

**Manuscript submission date:** 2024-01-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2024-01-27 01:32

**Reviewer performed review:** 2024-02-04 10:16

**Review time:** 8 Days and 8 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

Thanks for the possibility to review your work. I have some revisions I would kindly ask authors to address. 1.It is recommended that when introducing OSSN, including invasive squamous cell carcinoma (SCC) and non-invasive conjunctival intraepithelial neoplasia (CIN), a clearer distinction can be made between these two types, making it easier for readers to understand the differences between them. 2.It is recommended to provide simple explanations or definitions for professional terms in the text, such as "epitheiloma", "connective intraepitheial neoplasia (CIN)", etc. 3.It is recommended to provide more specific data or statistical information to increase persuasiveness when mentioning the prevalence of OSSN among the elderly. 4.It is recommended to arrange in logical order. Firstly, introduce the initial diagnostic method of OSSN, followed by the introduction and development of histopathology, and finally introduce recent improvements in staining methods to make it easier for readers to follow. 5.It is recommended that the ISH mentioned can distinguish reactive dysplasia from true dysplasia and provide an explanation of the advantages and disadvantages of other techniques. 6.It is recommended to provide additional explanations on the motivations



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for the modifications made to traditional technologies in 1994, as well as specific ways to overcome the limitations of old technologies. 7.It is recommended to provide more detailed examples of the unique features of IVCN in diagnosing OSSN. 8.It is recommended to compare UHR-OCT and HR-SD OCT techniques, and explain the basis for choosing which technique to use in different clinical situations. 9.It is recommended to provide more specific examples and application areas when describing the advantages of deep learning and transfer learning. 10.The article mainly focuses on the perspectives of technology and healthcare providers, and it is recommended to add discussions on how these technological advancements directly affect patient experience, satisfaction, and treatment outcomes. 11.The article mentions improving the training effectiveness of deep learning models by using larger and more comprehensive datasets. It is recommended to provide a description of the specific technical challenges currently faced and detailed solutions on how to overcome these challenges. 12.It is recommended to supplement information on data security and patient privacy protection when using deep learning technology to process medical images and personal health data.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** India

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**Reviewer chosen by:** Meng-Liu Luo

**Reviewer accepted review:** 2024-03-26 12:47

**Reviewer performed review:** 2024-03-27 13:31

**Review time:** 1 Day

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

#### **SPECIFIC COMMENTS TO AUTHORS**

In the manuscript, the authors have made effective modifications to my recommendations. In my opinion, this manuscript can be accepted in present form.