



SDI Review Form 1.6

Journal Name:	<u>Journal of Cancer and Tumor International</u>
Manuscript Number:	Ms_JCTI_35246
Title of the Manuscript:	Histopathological analysis for omental deposits in patients with gastric malignancies following gastrectomy
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	It is well written paper but its title is not going with the results many cases histopathology for omentum not done and this is Biaz of the results	Thank you very much for reviewing of manuscript. We sincerely appreciate you reviews and all the comments. 1. Its title is not going with the results many cases histopathology for omentum not done and this is Biaz of the results
Minor REVISION comments		
Optional/General comments		Perhaps the following background may be of assistance to the reviewer: 1. The study was motivated by the established cut of definition of D1 versus D2 gastrectomy which uses a cut-off of 16 lymph nodes. 2. The greater omentum is almost always resected during gastrectomy for cancer, and often ends up being the largest piece of tissue. 3. We erroneously thought there were lymphatics and therefore lymph nodes in the greater omentum; which if included in the count would easily reach the magic 16. 4. Practically, however it has been rare to reach the count following majority of gastrectomies. 5. The average number of lymph nodes in each station according to the Japanese Classification is known but up to recently there is nothing reported regarding the greater omentum. 6. We initiated a study for a Master degree with Department of Anatomy which was aborted because they reported that it was very difficult to look for "normal" lymph nodes in the greater omentum. 7. It then motivated the current study. 8. Additionally, popularization of omentum preserving gastrectomy (high recurrence when it is preserved versus high morbidity if it is resected).