Reviewer’s report

**Title:** Synchronous carcinoid and gastrointestinal stromal tumour of the stomach: a case report.

**Version:** 1  **Date:** 2 December 2010

**Reviewer:** Marek Wronscki

**Reviewer’s report:**

The manuscript, which I reviewed with interest, reports a case of coexisting carcinoid and gastrointestinal stromal tumor within the stomach. Concomitant tumors are quite rare and present particular diagnostic and treatment challenges. There is growing evidence confirming that the coexistence of gastrointestinal stromal tumors and adenocarcinomas is not coincidental. In contrast, the synchronous occurrence of a carcinoid and GIST seems to be just a coincidence, and as such has little clinical or scientific significance.

**Major compulsory revisions**

1. The authors conclude that the patients with synchronous GIST and carcinoid should have a meticulous follow-up because of a high risk and important consequences of possible metastases. This statement, however, applies to all the patients with cancer diseases, but the conclusions should reflect the lessons learned from the discussed case.

**Minor essential revisions**

1. According to the recent WHO classification, “neuroendocrine tumor” is the preferred term for the neoplasms originating from the diffuse neuroendocrine system, irrespective of their location. The term “carcinoid” is currently discouraged, although still common in everyday clinical practice. I would advise to follow the recommended terminology throughout the manuscript.

2. The first carcinoid tumor should be classified as well differentiated neuroendocrine tumor with uncertain behavior rather than “a carcinoid with aggressive clinical behaviour”.

3. “…tumour size and mitotic activity are the most significant parameters (for GISTs)” – The authors should be more specific and explain what this significance refers to (tumor malignant potential, prognosis).

4. The authors noted that the co-occurrence of GISTs with other neoplasms is high and ranges from 4.5% to 33%. Similarly, neuroendocrine tumors coexist with other neoplasms at a comparable rate. I would recommend to include this information in the text. In view of so high tumor co-occurrence in both GIST and carcinoid patients, the fact that the synchronous occurrence of these two
neoplasms have been reported so rarely, contradicts the hypothesis about their common pathogenesis.

5. The resected specimen is quite small for a partial gastrectomy. Was a wedge gastric resection performed rather than a partial resection?

6. There are too many figures in the manuscript. I would advise to limit the images to Figures 1, 3A and B, 4A and B.

Level of interest: An article of insufficient interest to warrant publication in a scientific/medical journal

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.