

## **Diagnosis and invasive staging: Non-surgical invasive mediastinal staging. EBUS**

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12-Apr-2020

Ref.: Ms. No. JCTRes-D-20-00013

**DIAGNOSIS AND INVASIVE STAGING: Non-surgical invasive mediastinal staging.  
EBUS**

Journal of Clinical and Translational Research

Dear author(s),

Reviewers have submitted their critical appraisal of your paper. The reviewers' comments are appended below. Based on their comments and evaluation by the editorial board, your work was FOUND SUITABLE FOR PUBLICATION AFTER MINOR REVISION.

If you decide to revise the work, please itemize the reviewers' comments and provide a point-by-point response to every comment. An exemplary rebuttal letter can be found on at <http://www.jctres.com/en/author-guidelines/> under "Manuscript preparation." Also, please use the track changes function in the original document so that the reviewers can easily verify your responses.

Your revision is due by May 12, 2020.

To submit a revision, go to <https://www.editorialmanager.com/jctres/> and log in as an Author. You will see a menu item call Submission Needing Revision. You will find your submission record there.

Yours sincerely,

Felipe Couñago  
Editorial Board Member  
Journal of Clinical and Translational Research

Reviewers' comments:

Reviewer #1: It is an interesting article, well written, but with very basic information, in a growing technique, and as the article is written, it avoids surgical interventions for the staging of lung carcinoma.

I think it is an article, suitable for publication in this journal, but I think it should try to be updated with more current bibliographic references, since it is published, and there are already 230 reviews on this field.

The algorithm is fine, being very clear.

For a bibliographic review, I think 39 references are very few, I recommend expanding.

The writing is correct, and easy to read, a very interesting article for people that not used usually this technique, and for students.

Reviewer #2: With much interest I have reviewed the paper by Pajares et al. entitled: "Non surgical invasive mediastinal staging EBUS".

As comments to add value to the document, I think it is appropriate to define the role and indication of mediastinoscopy in the initial staging of lung cancer in the same way as it has been explained with echoendoscopy.

Please provide images of the EBUS procedure.

There is additional documentation related to this decision letter. To access the file(s), please click the link below. You may also login to the system and click the 'View Attachments' link in the Action column.

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Author's response

[JCTRes-D-20-00013](#)

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[Reviewers have submitted their critical appraisal of your paper. The reviewers' comments are appended below. Based on their comments and evaluation by the editorial board, your work was FOUND SUITABLE FOR PUBLICATION AFTER MINOR REVISION.](#)

The authors thank the editors and reviewers for their comments and for the opportunity to revise the manuscript. We offer specific replies to the suggestions as follows:

Reviewers' comments:

Reviewer #1: It is an interesting article, well written, but with very basic information, in a growing technique, and as the article is written, it avoids surgical interventions for the staging of lung carcinoma.

I think it is an article, suitable for publication in this journal, but I think it should try to be updated with more current bibliographic references, since it is published, and there are already 230 reviews on this field.

The algorithm is fine, being very clear.

For a bibliographic review, I think 39 references are very few, I recommend expanding.

The writing is correct, and easy to read, a very interesting article for people that not used usually this technique, and for students.

Thank you for the positive appraisal.

This article is part of a monographic review entitled "New advances in lung cancer management" and this article belongs in a series of articles on "Diagnosis and invasive staging". For this reason, the authors have only referred to strictly the most relevant references. Nonetheless, in the review we have substantially expanded the number of bibliographic references.

Reviewer #2: With much interest I have reviewed the paper by Pajares et al. entitled: "Non surgical invasive mediastinal staging EBUS".

As comments to add value to the document, I think it is appropriate to define the role and indication of mediastinoscopy in the initial staging of lung cancer in the same way as it has been explained with echoendoscopy.

Please provide images of the EBUS procedure.

We thank the reviewer for addressing this important issue.

This article is part of a monographic review entitled "New advances in lung cancer management" and this article belongs in a series of articles on "Diagnosis and invasive staging". The series includes a specific article on "Invasive surgical mediastinal staging. VAMLA and TEMLA" which describes indications for mediastinoscopy in depth. For this reason, the authors have chosen not to repeat that information in their own article.

Regarding the images, we have added two referring to the equipment and the procedure.

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2<sup>nd</sup> editorial decision  
10-May-2020

Ref.: Ms. No. JCTRes-D-20-00013R1  
DIAGNOSIS AND INVASIVE STAGING: Non-surgical invasive mediastinal staging.  
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Dear authors,

I am pleased to inform you that your manuscript has been accepted for publication in the Journal of Clinical and Translational Research.

You will receive the proofs of your article shortly, which we kindly ask you to thoroughly review for any errors.

Thank you for submitting your work to JCTR.

Kindest regards,

Felipe Couñago  
Editorial Board Member  
Journal of Clinical and Translational Research

Comments from the editors and reviewers: