



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46293

Title: Chronic progression of an recurrent OOC into SCC: a case report and review of literature

Reviewer’s code: 02505493

Reviewer’s country: Greece

Science editor: Jin-Lei Wang

Date sent for review: 2019-02-15

Date reviewed: 2019-02-15

Review time: 9 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The m/s can be accepted for publication after a brief language polishing.

INITIAL REVIEW OF THE MANUSCRIPT



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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46293

Title: Chronic progression of an recurrent OOC into SCC: a case report and review of literature

Reviewer’s code: 00467030

Reviewer’s country: Taiwan

Science editor: Jin-Lei Wang

Date sent for review: 2019-02-15

Date reviewed: 2019-02-17

Review time: 10 Hours, 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The submitted manuscript intends to report the uncommon case of carcinoma (SCC) arising from multiple recurrence of orthokeratinized odontogenic cyst (OOC). After reading the entire manuscript carefully, the following points are suggested for further



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modification. Major concern: 1. The provided case history needs to be rewritten more clearly. To my opinion, the time frame of the case would be as follow: (1) The first occurrence: in January 2013, diagnosed as osteomyelitis of the left mandible and mandibular cyst by pathological examination. Suggestion: It needs to describe the case history with radiography; and show the pathological pictures. It needs to explain why it is a case of osteomyelitis. (2) The second time (the first recurrence): in January 2015, diagnosed by pathological examination was still the same as before. Suggestion: It also needs to show the case history with radiography again and also the pathological pictures and needs to explain why it is recurred. It is important to aware that for a benign case, it is not easily to be recurred. (3) The third time (the second recurrence): in June 2017, pathological diagnosis was the OOC of the left mandible (Figure 2). Suggestion: The case description is too brief. It needs to show the case history in more detail. For instance, what is the treatment modality, etc. Figure 1 is a panoramic view derived from CBCT. Other views such as axial, coronal, sagittal view need to be shown. No cystic stroma (capsule) is shown in figure 2, it would not be sure of cystic lining or detached dysplastic epithelium! (4) The fourth time (the third recurrence): in August 2018, performed partial mandibulectomy, pathological examination revealed moderately differentiated squamous cell carcinoma (Figure 4). Suggestion: It needs to explain why partial mandibulectomy is performed. Up to now, it is diagnosed as OOC, which is a benign lesion! Figure 3 is a panoramic view derived from CBCT. Other views such as axial, coronal, sagittal view need to be shown. Figure 4 does not have the cystic component; it is again hard to confirm to an original cystic lesion. In summary, the authors would first need to rewrite the case history in more detail and provide more accurate information so as make sure whether it is actually a case of central type oral squamous cell carcinoma!!

Minor concern 1. Usually, no need to have citations in abstract section. 2. Please make sure whether the keyword "cancerate" is correct. 3. Discussion is too simple. It needs to



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rewritten to have more information 4. Please pay attention to the grammar and typo errors for the entire manuscript.

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46293

Title: Chronic progression of an recurrent OOC into SCC: a case report and review of literature

Reviewer's code: 00227553

Reviewer's country: United States

Science editor: Jin-Lei Wang

Date sent for review: 2019-02-15

Date reviewed: 2019-03-06

Review time: 13 Hours, 19 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is a well-written case report of malignant transformation of an OOC. In my opinion, the value of this manuscript can be enhanced by the following: 1. The language needs polishing to make it easier to read 2. Title: Could be reworded to exclude abbreviations



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3. WHO Classification: OKC have been reinstated in the most current WHO classification, but there is debate about its "aggressiveness". There are studies describing PTCH1 gene mutation or inactivation that lead to this cystic lesion being neoplastic. These should be discussed in the manuscript. In addition, OKC can be solid, and a brief note on the term "keratocystic odontogenic tumor" for this variant should also be discussed. 4. Histology description: This could be enhanced, along with use of descriptive terms such as "onion skin-like" keratinization to help non-pathologists understand histologic features better. 5. Immunohistochemistry: Images of Ki-67 and p63 stains of these two entities would enhance the value of this manuscript, as they are likely to be used in clinical practice. 6. Discussion: This section needs to be expanded. References: This currently includes many case reports and only a few review articles; I would suggest adding some more relevant references, including case series/review articles on the new WHO classification of head and neck tumors. Thank you for your submission and contribution to the scientific literature.

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[Y] No