



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59078

Title: Large leiomyoma of lower esophagus diagnosed by EUS-FNA: A case report

Reviewer's code: 02823028

Position: Peer Reviewer

Academic degree: MBBS, MD

Professional title: Associate Professor, Research Associate

Reviewer's Country/Territory: Swaziland

Author's Country/Territory: China

Manuscript submission date: 2020-09-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-09-02 00:25

Reviewer performed review: 2020-09-08 01:06

Review time: 6 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

In this study, the authors reported a case of large esophageal leiomyoma. This case is rare and very interesting. The CT and endoscopic findings of this case were close to those of stromal tumors. However, through EUS-FNA examination, the final diagnosis was leiomyoma. The case is very well described, and the figures are very informative. In my opinion, this manuscript can be accepted for publication after a minor editing.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59078

Title: Large leiomyoma of lower esophagus diagnosed by EUS-FNA: A case report

Reviewer's code: 05266764

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-09-04 08:16

Reviewer performed review: 2020-09-08 01:09

Review time: 3 Days and 16 Hours

Scientific quality	<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
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS

Very interesting case. The pathology of leiomyoma is characterized by intersecting spindle cells with rich cytoplasm, and the malignant potential is low. In immunohistochemical examination, the specific signs of leiomyoma are diffuse positivity for desmin and smooth muscle actin, and negativity for CD34 and CD117. Abdominal CT and EUS can diagnose most upper gastrointestinal leiomyomas, but there are still some difficulties in the diagnosis of atypical lesions, which can easily be misdiagnosed as stromal tumors and other malignant lesions. In this case, the CT and endoscopic findings of this case were close to those of stromal tumors. However, through EUS-FNA examination, the final diagnosis was leiomyoma. The follow up data is missing, please add it. And a minor editing is required.