

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 60486

Title: Infectious complications during immunochemotherapy of post-transplantation lymphoproliferative disease (PTLD) – can we decrease the risk? A case study.

Reviewer's code: 03269794

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Chief Physician, Deputy Director, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-11-08 08:05

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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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 type="checkbox"/> Minor revision <input checked="" 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

SPECIFIC COMMENTS TO AUTHORS

In this case report, authors report the management of two solid organ transplanted patients with PTLD and urinary and pulmonary tract infections during ICTH, and discuss the role of interventions including the reduction of immunosuppression therapy, doses of chemotherapeutics and GCS-F used in the prevention of neutropenic fever, in preventing infectious complications. However, this case report has some problems as following: In the TREATMENT Sections, urinary and pulmonary tract infections (Page 8, Line 16-19) and bloodstream infections (Page 14, Line 9-10) are mentioned. Can authors give more data regarding urinary and pulmonary tract infections and antibiotic therapy? (1) Are the pathogenic pathogens derived from sputum or urine, the culture or the detection of nucleic acids? (2) What are the in vitro susceptibilities of bacteria? (3) What are the name, dosage and time antibiotic therapy? (4) How much are the values of serum inflammatory markers (such CRP, procalcitonin) before and after antibiotic treatment. (5) Page 14, Line 9-10: In numerous bloodstream infections, are all types of microorganisms (*Stenotrophomonas maltophilia*, ESBL *Escherichia coli*, MRCNS *Staphylococcus lentus*, and MRCNS *Staphylococcus hominis*) considered to be pathogenic pathogens? Why?