



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05190615

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-16 02:16

Reviewer performed review: 2021-01-16 08:34

Review time: 6 Hours

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 Grade E: Do not publish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 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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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Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

Epidural abscess is relatively rare, and the most common cause is puncture or injury. This patient had low back pain without other obvious symptoms, MRI showed epidural abscess, was suspected tuberculosis due to no improvement of initial treatment. The final diagnosis confirmed the coinfection of TB. Because the presentation of tuberculosis is becoming less typical, and spinal tuberculosis is more common than simple epidural abscesses, so when the cause of a spinal abscess is unknown, the abscess but not blood testing is more important, for example Tubercle Bacillus acid-fast staining. When systemic infection symptoms are not obvious, tuberculosis should be highly suspected, especially in patients with elevated ESR and CRP.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 03227821

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-16 10:52

Reviewer performed review: 2021-01-16 11:34

Review time: 1 Hour

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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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

This case report may provide reference for the diagnosis and treatment of patients in the future, and has certain clinical value.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05430304

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-19 03:16

Reviewer performed review: 2021-01-23 11:49

Review time: 4 Days and 8 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

1. The title describes an epidural abscess, but this case should be diagnosed as lumbar tuberculosis. 2. The paper only provided the MRI before the first operation. Methicillin-resistant *S. epidermidis* infection can not explain the destruction of lumbar vertebrae and cold abscess. It is unreasonable to exclude tuberculosis based on pathological results. 3. There is no images after the second operation. 4. Although the article mentions a ten-year follow-up, there is no follow-up outcomes.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05353971

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Research Fellow, Research Scientist, Teacher

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-16 02:34

Reviewer performed review: 2021-01-25 13:45

Review time: 9 Days and 11 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 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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

The paper presents an interesting and rare case of SEA, which coinfects with bacteria and tuberculosis. And it is praiseworthy that the case had been followed up for ten years. This is a well-written paper. For the benefit of the reader, however, a number of points need clarifying and certain statements require further justification. My detailed comments are as follows: 1. Accurate diagnosis of tuberculosis has been rendered increasingly difficult. To our knowledge, T-spot is a test with high sensitivity for tuberculosis diagnosis, had it been conducted in the case? And if not, what was your consideration? 2. For bone infections, especially bacterial infections, it is controversial whether to perform internal fixation implantation after debridement. It would be catastrophic if the infection is not controlled. And posterior instrumentation was performed after debridement in the case, what was your consideration? 3. The normal reference value should be marked on the part of laboratory examination. 4. Methicillin-resistant *S. epidermidis* was identified from intraoperatively acquired abscess culture at the first surgery. What was the type of bacteria at the second surgery? In addition to taking antitubercular medication after the second surgery, is there any oral anti bacteria drugs? 5. Did the patient undergo MRI imaging during the 10-year follow-up? If there were laboratory and Imaging examinations after the patient being cured, it would be more perfect. 6. The author should give a detailed plan of antituberculosis treatment, including dose and drug adjustment plan.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05355553

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-17 23:04

Reviewer performed review: 2021-01-27 16:39

Review time: 9 Days and 17 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 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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

Good work, How to identify coinfection or postoperative infection?



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 03207387

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-16 02:17

Reviewer performed review: 2021-01-29 07:20

Review time: 13 Days and 5 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" 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

The authors reported a 75-year-old female complaining low back pain. MRI revealed an Spinal epidural abscess (SEA) at the lumbosacral segment. Staphylococcus hominis and methicillin-resistant Staphylococcus epidermidis were identified from preoperative blood culture and intraoperative abscess culture, respectively. The patient underwent treatment with vancomycin medication for 9 weeks after surgical drainage of the SEA. However, the low back pain recurred 2 weeks after vancomycin treatment. Then, MRI revealed an aggravated SEA in the same area in addition to erosive destruction of vertebral bodies. Revision surgery was performed for SEA removal and spinal instrumentation. The microbiological study and pathological examination confirmed Mycobacterium tuberculosis as the pathogen concurrent with the bacterial SEA. The patient improved completely after 12 months of antitubercular medication. The authors thought coinfection of bacteria and tuberculosis occurred in the case. However, the Staphylococcus hominis and methicillin-resistant Staphylococcus epidermidis were identified from preoperative blood culture and intraoperative abscess culture, respectively. Different bacteria were seen in blood culture and intraoperative abscess culture, so the possibility of contamination during culture could not be excluded. And T-spot, PPD and X-pert tests are necessary to confirm the diagnosis of TB. Besides, anti-acid staining of the abscess are needed.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05729651

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-17 15:13

Reviewer performed review: 2021-01-29 17:12

Review time: 12 Days and 1 Hour

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
Re-review	<input checked="" type="checkbox"/> Yes <input 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

The idea of the paper is innovative, and they completed up to 10 years of follow-up, that is the excellent job. But There are some questions for the author to answer: 1) I think the author must write down how many cases have been reported in the literature and conduct a small review.2) Changes in all aspects of the patient during the 10-year follow-up should be described in detail, including the treatment plan, treatment outcomes, and changes in the patient's condition, etc.3) Please provide your basis for the medication regimen after surgery.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05345734

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Physician, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-18 16:24

Reviewer performed review: 2021-01-31 13:43

Review time: 12 Days and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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

authors have successfully addressed all comments.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05355553

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-02-24 04:14

Reviewer performed review: 2021-02-24 04:23

Review time: 1 Hour

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

SPECIFIC COMMENTS TO AUTHORS



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160, Pleasanton, CA 94566, USA
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E-mail: bpgoffice@wjgnet.com
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good work



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62701

Title: Spinal epidural abscess due to coinfection of bacteria and tuberculosis: A case report

Reviewer's code: 05353971

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Research Fellow, Research Scientist, Teacher

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-01-16

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-02-24 02:14

Reviewer performed review: 2021-02-24 13:29

Review time: 11 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 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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



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The authors have revised the manuscript referring to the comments.