

Specific Comments to Authors

- 1) the title did not reflect the main subject/hypothesis of the manuscript. THE TITLE WAS CORRECTED
 - 2) page 1, "In both diseases patients who do not respond to initial" [add a comma after diseases] THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
 - 3) A list of abbreviations should be provided upfront. PROVIDED
 - 4) Abstract, "Many new drugs including polatuzumab" [add a comma after drugs] ABSTRACT REWRITED
 - 5) The current version of the Abstract is written like an introduction. I would suggest the authors elaborate on specifics "In this article, we review the results of different immunotherapy drugs and cellular therapies in the treatment of R/R lymphomas and also their toxicity and practical aspects for clinicians." What did they offer? Reflecting on the title: "A COMPLETE SWITCH FROM STEM CELL TRANSPLANTATION?" They failed to explore the exact procedure of "switch" and why and how, and the consequence. i.e., Entailing "results, positions, practical aspects, and future directions" in Abstract can attract the audience. ABSTRACT REWRITED
 - 6) Misspelling: KEYORDS THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
 - 7) Core tip: misspelling: Lymphoma THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
- Specific comments: 8) Page 2, "dexamethasone (R-DHAP) or rituximab" ♦ [KEYWORDS] THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
- 9) All four tables should be shown with the number of patients (demographic data), the location of trials, and the mechanism of action plus adversary effects; otherwise, such statement "ORR/CR: 64%/38%; PFS 6.7 mos" did not tell much about outcomes. CORRECTED
 - 10) P.4, "In some series of patients with aggressive lymphomas, loss of class I MHC molecules occur in approximately 75% of patients," – use [occurs]. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
 - 11) P.5, "associated with a shorter progression-free survival (PFS) in patients with cHL," uncountable noun survival should be without a. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC
 - 12) P.5, "Binding PD-1 to PD-L1 / 2 receptors on both tumor cells and other cells of the immune system, lead to exhaustion and apoptosis of T-cell" – use [leads]. It is not scientifically correct with this statement. Revise it according to those two citations. AFTER REVISION WE HAVE CONCLUDED THAT THIS SENTENCE IS CORRECT.
 - 13) P.5., "Finally, a fourth mode of inhibition," use [the fourth]. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

14) P.6 "became an gold standard of treatment," use [a], not an. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

15) P.7, "thus increasing atibody-dependent cellular cytotoxicity (ADCC) (40,41). THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC " Mistyping, [antibody], not atibody. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

16) P.6, "If patient respond and" ◇ [Lymphoma]. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

17) P6. "The first is to recognize and neutralize foreign cells, both microorganisms (bacteria, viruses, etc.), but also malignant cells." Grammar rules to use [and], not "but also" in the context. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

18) P.6, "The human immune system has two" should be illustrated with schematic diagrams instead of the text narratives. IN OUR OPPINION THE IMMUNE SYSTEM IS NOT THE POINT OF THIS MANUSCRIPT, AND WAS NOT CONSIDERED TO BE MANDATORY FOR THIS MANUSCRIPT.

19) P.11, "Similarly to obinutuzumab, tafasitamab has a strong affinity for," use [similar to] THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

20) P.6-7, they needed to discuss the loss of the target and salvage therapies. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

21) Page 6, "controlling the immune response" ◇ Rituximab. [controlling] the immune response. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

22) P.8, "prevents the binding of SIRPa magrophages to" misspelling. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

23) Ref. 53 is out of the context. IN OUR OPPINION THE SENTENCE IS COMPLETELY IN THE CONTEXT

24) P.6, "9.5 vs 3.7 monthes; HR 0.36, p = 0.001), a," use [months] THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

25) P11. "has led to a greater efficacy," delete a. THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC

26) P.11, "The toxicity profile was very similar to other CAR-T products tested in DLBCL," What specific toxicity? Which should be included in all four tables. INCLUDED IN THE TABLES

27) P.11, "Clinical studies with axi-cel and tisa-cel included fit patients (ECOG 0-1) (96.97),), however, it has been shown in real world data analyzes that patients with poorer performance status can also be treated successfully (105)." It is a comma splice error. CORRECTED

28) The last section, the main point of the manuscript, "ARE WE GOING TO SWITCH STEM CELL TRANSPLANTATION WITH IMMUNOTHERAPY?" did not thoroughly convince the reader to think such a switch. They needed to expand to the problem in the mechanism of action for ASCT and came up with innovation to address such issues. IN THE LAST SECTION WE PROVIDED THE CONCLUSION OF THE MANUSCRIPT AND BRIEFLY POINTED OUT THE CURRENT AND POTENTIAL FUTURE POSITION OF

IMMUNOTHERAPY OF LYMPHOMA TREATMENT IN COMPARISON TO CURRENT STANDARDS OF TREATMENT. WE DID NOT WANT TO GO INTO DETAILS AND MECHANISMS, SO THAT READERS CAN CLEARLY HAVE THE POINT OF THE IMMUNOTHERAPY POSITION IN TREATMENT OF THIS DISEASE.

29) Overall, the authors piled up with the data and did not extract the thematic vision in the field. Multiple lines of grammar errors, punctuations, and style of English standard manifested in the flow of logic, hindering its narratives.◇ [responds] THE MANUSCRIPT WAS EDITED BY EDITING COMPANY SUGGESTED BY WJSC