

PEER-REVIEW REPORT

Name of journal: World Journal of Stem Cells

Manuscript NO: 64262

Title: IMMUNOTHERAPY IN THE TREATMENT OF LYMPHOMA

Reviewer's code: 02446041

Position: Editor-in-Chief

Academic degree: MPhil, PhD

Professional title: Adjunct Professor, Research Scientist, Senior Research Fellow

Reviewer's Country/Territory: United States

Author's Country/Territory: Serbia

Manuscript submission date: 2021-02-13

Reviewer chosen by: Lian-Sheng Ma

Reviewer accepted review: 2021-02-16 19:43

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 Grade E: Do not publish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

SPECIFIC COMMENTS TO AUTHORS

Specific comments: 1) the title did not reflect the main subject/hypothesis of the manuscript. 2) page 1, "In both diseases patients who do not respond to initial" [add a comma after diseases] 3) A list of abbreviations should be provided upfront. 4) Abstract, "Many new drugs including polatuzumab" [add a comma after drugs] 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. 6) Misspelling: KEYORDS [KEYWORDS] 7) Core tip: misspelling: Lymphoma [Lymphoma]. 8) Page 2, "dexamethasone (R-DHAP) or riruximab" Rituximab. 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. 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]. 11) P.5, "associated with a shorter progression-free survival (PFS) in patients with cHL," uncountable noun survival should be without a. 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. 13) P.5., "Finally, a fourth mode of inhibition," use [the fourth]. 14) P.6 "became an gold standard of treatment," use [a], not an. 15) P.7, "thus increasing atibody-dependent cellular cytotoxicity (ADCC) (40,41)."

Mistyping, [antibody], not atibody. 16) P.6, "If patient respond and" [responds] 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. 18) P.6, "The human immune system has two" should be illustrated with schematic diagrams instead of the text narratives. 19) P.11, "Similarly to obinutuzumab, tafasitamab has a strong affinity for," use [similar to] 20) P.6-7, they needed to discuss the loss of the target and salvage therapies. 21) Page 6, "controlling the immune response" [controlling] the immune response. 22) P.8, "prevents the binding of SIRPα magrophages to" misspelling. 23) Ref. 53 is out of the context. 24) P.6, "9.5 vs 3.7 monthes; HR 0.36, p = 0.001), a," use [months] 25) P11. "has led to a greater efficacy," delete a. 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. 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. 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. 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.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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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

Where are those five tables in the original version? I did not see them in the revised



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

version.