



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 68466

Title: Adenomyoepithelioma of the breast with malignant transformation and repeated local recurrence: A case report

Reviewer's code: 02512347

Position: Editorial Board

Academic degree: FRCS (Gen Surg), MBChB

Professional title: Chief Doctor, Surgeon

Reviewer's Country/Territory: Saudi Arabia

Author's Country/Territory: Japan

Manuscript submission date: 2021-05-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-16 04:27

Reviewer performed review: 2021-06-16 05:07

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 Grade E: Do not publish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 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 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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Interesting case. I have the following comments: How many mitotic figures were counted in the first and second lumpectomy specimens? High mitotic figures were reported upon in the first and second lumpectomy specimens, did not this raise the suspicion of aggressive behavior of this supposedly benign condition? The resection margin of the first resection were reported "relatively clear", how clear was that. To me this means tumor was close to the resection margins. Please elaborate. As there are about 12 reported similar cases, it is worth tabulating all reported cases including this case highlighting radiological, cytological, and pathological diagnoses. Also, age at presentation, symptoms, type of surgical treatment, time lapse between local resection and recurrence and final outcome. This condition is known for its hematological rather than lymphatic spread. Did you do any metastatic workup after receiving the final diagnosis of malignant adenomyoepithelioma? This was not mentioned in the text.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Professional title: Chief Doctor, Surgeon

Reviewer's Country/Territory: Saudi Arabia

Author's Country/Territory: Japan

Manuscript submission date: 2021-05-31

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-07-09 13:47

Reviewer performed review: 2021-07-10 04:40

Review time: 14 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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Thank you for submitting the revised version. Unfortunately, I still have more comments:

1) The presentation of the case in this version is somewhat confusing to me than the original version. I have given some suggestions below for improvement. 2) This version has some typographical errors (see below). 3) It is nice to see you incorporating a table summarizing the published cases. However, a brief summary of your table should be added in the Discussion text such as the age range (mean), use of radiological diagnostic modalities, surgical procedures, outcome summary, etc. Also, rearrange the list of cases in chronological order based on their year of publications. Also, your case should be the last and not the first. 4) The Abstract Conclusion: delete "We reported a very rare case of AME with repeated local recurrences and malignant transformation". change the last sentence to "Treatment of AME requires caution, as it may exhibit repeated recurrences after local excision as well as malignant transformation". 5) Introduction: change the last sentence to: "We report a case of malignant transformation after repeated wide local excisions of AME." 6) Change Chief Complaints to: "A 53-year-old Japanese woman presenting with a right breast mass at the site of a previous wide local excision of AME." 7) In the History of present illness, more description of the breast symptomatology such as size and site of the lump is needed. 8) Change " Postoperative pathology was also AME. The border of the tumor was relatively clear. Excisional margins were negative at least 5 mm away from the resection margin." to " Postoperative pathology confirmed AME. The tumor resection margins were relatively clear with at least 5 mm clearance at the nearest margin." 9) Typographical error: invasive growthth. Correction: growth. 10) Change "Eight months later, the patient returned to the hospital because of a palpable mass in the same area." to " Eight months later, the patient presented with a recurrent palpable mass in the same area." 11) In Family history: specifically mention negative/positive family history of breast diseases or cancer. 12) In Physical Examination: more detailed examination is needed (size and location of the lesion, skin



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changes, status of the axilla, etc.) 13) "Laboratory examinations were almost normal range". What examinations? delete 'almost' and change it to 'within'. 14) I feel Treatment section should proceed the Final diagnosis section. 15) Under Follow-up: "Chest x-rays and other tests ...". What are the other tests?) 13) Figures: Failed to open with me, but from legends you seem to present 1 figure for the current presentation instead of the previous 3 figures.