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## PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 75598

Title: Delayed inflammatory reactions associated with rhinoplasty using alloplastic implant after

COVID-19 vaccination: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 05420211 Position: Peer Reviewer

Academic degree: BSc, MPhil, MSc

Professional title: Academic Research, Research Associate, Teacher

Reviewer's Country/Territory: Pakistan

Author's Country/Territory: South Korea

Manuscript submission date: 2022-02-06

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-04-26 19:04

Reviewer performed review: 2022-05-07 07:01

Review time: 10 Days and 11 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish	
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection	
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection	
Re-review	[Y] Yes [ ] No	
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous	



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

# SPECIFIC COMMENTS TO AUTHORS

Comments on 75598 Manuscript No.: 75598 Title: Delayed inflammatory reactions associated with rhinoplasty using alloplastic implant after COVID-19 vaccination: A case report World Journal of Clinical Cases In this study, the author has studied "Delayed inflammatory reactions associated with rhinoplasty using alloplastic implant after COVID-19 vaccination: A case report." The manuscript is interesting and well written. Sentence making is good in this manuscript. However, the English language used in the manuscript needs minor improvements as there are some punctuation and grammatical mistakes present throughout the manuscript. The figures required the proper explanation and caption. Moreover, research models are not discussed in an understandable manner, and the introduction section is poorly followed by literature, which reflects that the author needs a more comprehensive way of thinking. But the results are very good and presented well. It is obvious that the quality of the manuscript does not fulfil the standards of the journal, therefore, should be reconsidered after major revision. Specific comments: 1. Please revise the title and make it more attractive. 2. Page 3: "As there was no improvement in the patient's condition after administration of non-steroidal anti-inflammatory drugs and antibiotics..." Please add the names of drugs and antibiotics that are used for treatment. 3. The Abstract needs to be critically revised, there are a few grammatical mistakes, and the results are not well presented. 4. Please add more strong keywords. 5. Page 5: The whole introduction section is general. Authors are advised to revise the introduction section carefully and add more data to make an association between each sentence to support the problem statement. It is advised to add literature in introduction section to create a research gap. 6. Page 5: What is the novelty of the present study? 7. Page 7: "He was administered non-steroidal anti-inflammatory drugs and antibiotics once each in the emergency room." Please add the exact quantity of drug administration. 8. Page 8: "He was then transferred to our hospital to undergo a revision surgery under general anesthesia." Please add the name of the hospital. 9. The discussion section is not up to the mark; the authors only discussed the literature without any information on the results. No overall



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limitations are added. 10. The conclusion section could be in a single paragraph and without any reference. 11. The present study lacks future recommendations. 12. The figures need proper interpretation and appropriate captions.



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List of revised manuscripts by authors and comments

List of	revised manuscripts by au	thors and confinents
No.	Location	Comments and answers
1	Title (Page 1)	Comment: Please revise the title and make it more attractive.
		Answer: We will change the title to "Delayed inflammatory response
		evoked in nasal alloplastic implants after COVID-19 vaccination: A
		case report".
2	Case summary (Page 3)	Comment: "As there was no improvement in the patient's condition
		after administration of non-steroidal anti-inflammatory drugs and
		antibiotics" Please add the names of drugs and antibiotics that are
		used for treatment.
		Answer: We will change to "As there was no improvement in the
		patient's condition after the conservative treatment, surgical removal
		of an alloplastic nasal implant was performed.". The main text will
		mention the exact names of drugs and dosage.



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3	Abstract (Page 3)	Comment: The Abstract needs to be critically revised, there are a few grammatical mistakes, and the results are not well presented.
		Answer: We implemented grammatical corrections and revised our conclusion.
		Revised conclusion: "The correlation between DIRs and COVID-19
		vaccination has not been reported yet and the exact mechanism is
		unclear. Because the uncontrolled inflammatory reactions on the nose
		leave serious sequelae, surgeons should be conscious of the
		correlation between COVID-19 vaccines and DIRs associated with
		nasal alloplastic implants. And further histological or microbiological
		studies should be performed to determine the cause of DIRs."
4	Keywords (Page 3)	Comment: Please add more strong keywords.
		Answer: We will change to "Delayed inflammatory reactions;
		Alloplast rhinoplasty: Silicone; coronavirus disease 2019; Vaccination;
		Case report".
		Case report.



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5	Introduction	(Page 5)	)
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Comment: The whole introduction section is general. Authors are advised to revise the introduction section carefully and add more data to make an association between each sentence to support the problem statement. It is advised to add literature in introduction section to create a research gap.

Answer: We've already added enough literature to start our research. A comparison of the COVID-19 vaccination and the HA filler addresses the need for our study.

# Introduction (Page 5)

Comment: What is the novelty of the present study?

Answer: Explain that our case presentation and treatment process will be a crucial resource in the coronavirus pandemic. For this reason, we will change the last paragraph of the introduction to " Although the incidence of DIRs in alloplast rhinoplasty may be low, the management of DIRs is crucial because DIRs can cause serious esthetic and functional complications[3]. And increased COVID-19 vaccination rates during the COVID-19 pandemic may be a new risk factor for DIRs in alloplast rhinoplasty. In this case report, we present the first case of DIRs in alloplast rhinoplasty after the first administration of the COVID-19 vaccine. The patient who had undergone alloplast rhinoplasty with a silicone implant eight years ago developed DIRs within several days after administration of the first dose of the mRNA Pfizer COVID-19 vaccine. This case and our course of treatment will provide insights into the correlation between the COVID-19 vaccines and DIRs associated with alloplastic implants in rhinoplasty.".



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7	Treatment (Page 7)	Comment: "He was administered non-steroidal anti-inflammatory drugs and antibiotics once each in the emergency room." Please add the exact quantity of drug administration.
		Answer: The exact name and dosage of the drug were mentioned.  "He initially received an intravenous injection of 30 mg of ketorolac tromethamine (Kerola, non-steroidal anti-inflammatory drugs) and 1g of Cefazolin in the emergency room."
8	Treatment (Page 7)	Comment: "He was then transferred to our hospital to undergo a revision surgery under general anesthesia." Please add the name of the hospital.  Answer: We will add the name of the hospital. "He was then transferred to the Yeungnam university hospital to undergo revision surgery under general anesthesia."



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9	Discussion (Page 9)	Comment: The discussion section is not up to the mark; the authors
		only discussed the literature without any information on the results.
		No overall limitations are added.
		Answer: A discussion section is already displayed in the manuscript
		and describes the laboratory results performed, microbial cultures,
		and biopsies. As a case report, we will not mention the overall
		limitations.



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10	Conclusion (Page 10)	Comment: The conclusion section could be in a single paragraph and without any reference.
		Answer: References in the conclusion section have been removed.  And some portions of the content have been sent to the discussion section to form a single paragraph.
		Revised conclusion: "The correlation between COVID-19 vaccines and soft tissue filler reactions has been well studied, and global recommendations have been proposed. In contrast, DIRs in alloplast
		rhinoplasty are rare, and cases related to COVID-19 vaccines have not yet been reported. Through this case, it was confirmed that the
		COVID-19 vaccine could be a possible factor in DIRs in nasal alloplastic implants. Surgeons should be conscious of the possibility
		and perils of DIRs with COVID-19 vaccination. And if DIRs occur, immediate treatment should be instituted. And additional studies should be conducted to establish clear correlations and mechanisms.
		Patients who undergo alloplast rhinoplasty must be educated about the risk of DIRs before COVID-19 vaccination and consent should be
		obtained from them."
11	Discussion (Page 9)	Comment: The present study lacks future recommendations.
		Answer: The discussion section already mentions future treatment and research methods, and we only make some modifications.
		Revised discussion: "As the COVID-19 vaccination rate increases, the incidence of DIRs in alloplast rhinoplasty will increase. However,



12

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vaccination is necessary because of the morbidity, mortality, and socioeconomic impact of the COVID-19 pandemic[8]. Surgeons should be conscious of the possibility and perils of DIRs in alloplast rhinoplasty. However, the management of DIRs in alloplast rhinoplasty can be quite challenging due to the mechanisms and causes of DIRs that have not yet been elucidated[7]. Patients with DIRs in nasal alloplastic implants should receive empirical antibiotics and undergo percutaneous drainage if needed[3]. Because DIRs are often transient, self-limited diseases and resolve within days to weeks, further surgical intervention is not always necessary[3, 7]. If the conditions and symptoms of the patient do not improve despite conservative treatment, removal of the nasal implant via surgery might accelerate the patient's recovery. In our case, the patient experienced an improvement in symptoms within the first day after surgery. With implant removal and total capsulectomy, curettage of the inflammatory tissue and granuloma-like lesions should be performed. The space where the implant resides should be irrigated copiously and a drain should be placed to prevent the formation of hematoma or seroma. A histological study of the capsules and additional bacterial culture tests can be useful data for determining the cause of DIRs." Figure Legends (Page Comment: The figures need proper interpretation and appropriate captions. Answer: We will make some modifications.