



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 77198

**Title:** Complete recovery from segmental zoster paresis confirmed by MRI: A case report

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05190615

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2022-04-19

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-21 14:50

**Reviewer performed review:** 2022-04-21 15:32

**Review time:** 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

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

#### **SPECIFIC COMMENTS TO AUTHORS**

Cervical plexus block, axillary nerve block, and cervical epidural block, was performed during hospitalization. Please describe specific medication details, for example, were glucocorticoids added to local anesthetics? Long or short action? Was the medication formulation the same for both neuraxial blocks?



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**Peer-review model:** Single blind

**Reviewer's code:** 02729415

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Academic Fellow, Chief Physician

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2022-04-19

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-23 23:24

**Reviewer performed review:** 2022-04-23 23:35

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
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<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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#### **SPECIFIC COMMENTS TO AUTHORS**

A very interesting case. It has a good suggestive effect and needs clinical attention.



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**Peer-review model:** Single blind

**Reviewer's code:** 03739881

**Position:** Peer Reviewer

**Academic degree:** Doctor

**Professional title:** Chief Doctor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2022-04-19

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-21 13:58

**Reviewer performed review:** 2022-04-28 11:55

**Review time:** 6 Days and 21 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

### **SPECIFIC COMMENTS TO AUTHORS**

Segmental zoster paresis can present with severe clinical manifestations and render patients unable to carry out the activities of daily living. Electromyography is the most important diagnosis test. Magnetic resonance imaging (MRI) can also identify clinical abnormalities associated with this condition. My questions and suggestions are as follows: Electromyography is the most important diagnosis test for Segmental zoster paresis. In the article there is only figure 1, but no follow-up of 16 months' result. Magnetic resonance imaging can show higher signal intensity, but this abnormal finding of MRI is nonspecific and can appear in other conditions. How to distinguish Segmental zoster paresis from other infection?



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**Peer-review model:** Single blind

**Reviewer's code:** 05077807

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor, Staff Physician

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2022-04-19

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-24 06:12

**Reviewer performed review:** 2022-05-02 16:14

**Review time:** 8 Days and 10 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
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<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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### **SPECIFIC COMMENTS TO AUTHORS**

The article is very interesting, providing a case of segmental zoster paresis confirmed by MRI. The etiology, clinical manifestations, therapeutic methods and the value of MRI in the diagnosis of the disease were introduced in detail. I have a few comments to further improve the article: 1. Introduction-line 4- Please add references. 2. Imaging examinations-line 1- I suggest rephrasing "increased T2 signal intensity" as "hyperintense signal on T2-weighted images". 3. Discussion- paragraph 1- line 3 - Please add references. 4. Discussion- paragraph 1-line 1- I suggest rephrasing "increased T2 signal intensity" as "hyperintense signal on T2-weighted images". 5. References- please modify the format of references based on the Guide for Authors. 6. Figure 2/3- In general, MRI enhancement is performed on the T1WI sequence, but Figure 2 shows a T2WI/FS image. Please verify the imaging sequence and method. In addition, if it is enhanced on T2WI/FS, how does the author differ pathological enhancement from denervation injury on T2WI/FS imaging?



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 05077807

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor, Staff Physician

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2022-04-19

**Reviewer chosen by:** Jia-Ru Fan

**Reviewer accepted review:** 2022-07-08 14:53

**Reviewer performed review:** 2022-07-08 15:43

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Peer-reviewer statements</b>	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**

1. Please reply the comments one by one and upload the annotated MANUSCRIPT. 2.

It was mentioned in the last comment-to-author: "Figure 2/3- In general, MRI enhancement is performed on the T1WI sequence, but Figure 2 shows a T2WI/FS image. Please verify the imaging sequence and method". In conventional MRI examination, enhanced examination is performed on T1WI, because edema cannot be distinguished from enhancement on T2WI. I guess the sequence of pictures selected here was not correct, so the author needs to check it with the radiologist. However, the author did not explain this point in the answering-to-reviewers.