

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 78284

Title: Diagnosis and treatment of tubal endometriosis in women undergoing

laparoscopy: A case series from a single hospital

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06121310 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-07-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-07 05:11

Reviewer performed review: 2022-07-08 07:25

Review time: 1 Day and 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] 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



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Thank you for the opportunity to review interesting manuscript. The authors reviewed 30 patients were diagnosed with pathologically confirmed TEM at Ruijin Hospital from January 2013 to December 2021. It provided a clinical basis for the diagnosis and treatment of TEM. However, here are the contents that need to be revised and improved: 1.Please describe the statistical methods used in this manuscript. 2.A table with the information for multiple patients is suggested. 3.The word "Figsure" is wrong. Please prove that the source of the tissue in the HE-stained figure is the fallopian tube. And the figure 3 should be scaled. 4.Please summarize the significance of this retrospective study in the discussion.



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Reviewer's code: 05374991 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor, Master's Student, Research Assistant

Reviewer's Country/Territory: Germany

Author's Country/Territory: China

Manuscript submission date: 2022-07-06

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-09-01 02:36

Reviewer performed review: 2022-09-13 22:16

Review time: 12 Days and 19 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
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	[] Willion Tevision [1] Wildjon Tevision [] INEJection
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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

General Impression: The authors conducted a study to characterize the clinical features and surgical and pathological findings of patients with Fallopian tube endometriosis. This type of endometriosis is often disregarded. Therefore, the aim of the paper is novel. However, the small sample size and the confusing structure of the results are the major disadvantages of this paper. In addition, the authors missed important information in the methods section and the introduction is very brief. I think this manuscript could be worth publishing after having it revised by the authors. Comments: 1) In the background section of the abstract, the core tip and the main text, the definition of tubal endometriosis is imprecise since endometriosis could be present in any layer of the Fallopian tube. Therefore, I suggest writing "within any part of the Fallopian tube". 2) In the results section of the abstract, please mention the number of patients who had hydrosalpinx. In addition. It would be valuable to know the percentage of patients who conceived naturally and gave birth to healthy babies. 3) In the results section of the abstract, please clarify the meaning of: "some patients had a history of multiple factors". I prefer deleting this sentence because it was not mentioned in the main text. 4) In the conclusion section of the abstract and the core tip, it is unclear on which basis you concluded that tubal endometriosis is related to the mentioned factors. In addition. Those procedures are common and carried out broadly, unlike tubal endometriosis. which excluded that those could be predisposing factors. 5) The introduction of the main text is very brief, please give a better background about the types of fallopian tube endometriosis and the pathogenesis of endometriosis. Please use this paper as a reference: https://www.doi.org/10.3390/jcm9061905 6) In the diagnostic criteria of



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TEM section, please clarify whether you used immunohistochemistry (mainly ER for the glands and CD10 for the stroma) to diagnose endometriosis. In addition, please state whether or not you gave special consideration to potential lesions in the medial portion of the Fallopian tube since tubal endometriosis at this part could be confused with endometrial epithelization of the Fallopian tube. Please read carefully this paper: https://www.doi.org/10.3390/jcm9061905 7) In the statistical analysis section, please mention what statistical tests you used to determine the data distribution. 8) In the clinical manifestations section, please mention what were the symptoms (if any) of the two patients who had only tubal endometriosis. 9) In the clinical manifestations section, please explain what is a tubal cystectomy. I am not familiar with this procedure. 10) In the clinical manifestations section, according to the text, the mean age of the patients was calculated based on the data of 29 patients only while you had 30 patients. Please clarify this point. 11) In the laparoscopic surgery section, please explain the meaning of "twisted enlargement". I am not familiar with this pathology. Are you referring to tubal torsion? 12) I would suggest summarizing the main findings of the results in tables with frequencies and percentages.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 06121310
Position: Peer Reviewer
Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-07-06

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-10-11 03:48

Reviewer performed review: 2022-10-11 07:07

Review time: 3 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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

SPECIFIC COMMENTS TO AUTHORS

Please provide the HE-stained figure under low power to prove that the tissue came from the fallopian tube. The current figure can not reprent the whole field of it. And plaese provide the figure of IHC.



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Reviewer's code: 05374991 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor, Master's Student, Research Assistant

Reviewer's Country/Territory: Germany

Author's Country/Territory: China

Manuscript submission date: 2022-07-06

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-10-11 15:25

Reviewer performed review: 2022-10-12 00:14

Review time: 8 Hours

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

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, Thank you for taking the time to revise your manuscript and addressing my comments. I confirm that most of my questions were appropriately answered. However, three comments were not corrected in the same text but sufficiently addressed in the answer to reviewers files. Please ensure to correct the following in the main text: Comments: 1) Regarding the conclusions section of the abstract, it still states the following "The related factors of TEM may include tubal sterilization, IUD insertion, and other uterine cavity operation". These are edited in the main text but not in the abstract. Please revise this part carefully and delete irrelevant content. 2) Please include the answer to (comment 6) in the diagnostic criteria of the TEM section of the main text. 3) Please include the figure used to answer (comment 11) of the previous round along with its explanation in the main manuscript.