

3 SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and provide point-by-point responses to each of the issues raised in the peer-review report(s); these are listed below for your convenience:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Dear Authors, Thank you for submitting your manuscript entitled, "Efficacy of anlotinib combined with radioiodine to treat scalp metastasis of papillary thyroid cancer: A case report and literature review". The manuscript is well written, and the topic is interesting and timely. However, several major criticisms should be addressed as the followings.

1. The patient underwent surgery for primary lung cancer, but it is questionable whether the thyroid gland or the lungs were primary or not. It would be better to extract DNA from the tumor tissue and perform next-generation sequencing to check for mutations such as TERT promoter mutation, PET fusion, TP53, etc., citing the following article. If impossible, please cite at least the following article and add a sufficient description on this important subject in the "Discussion section". Qing Li, et al. *Frontiers in Oncology* 2021;11:569429

Reply: Regrettably, we only have NGS data about the thyroid cancer, in which 3 proto-oncogene mutations in BRAF, KRAS and IGF1R were detected. Otherwise, this patient was diagnosed as primary thyroid cancer with scalp metastasis (derived from the histology findings) and lymph node metastasis as well as primary lung cancer (provisionally diagnosed and mentioned in the limitation section of our manuscript).

We have added the Qing Li, et al. *Frontiers in Oncology* 2021;11;569429 reference to the revised Results and Discussion sections.

2. The description is lacks accuracy. I think the final diagnosis is incorrectly listed. Correctly, it should read "Scalp metastasis, skull metastasis, right upper lung metastasis (or primary right lung cancer?) Cervical lymph node metastasis? It appears to be "bilobed papillary carcinoma of the thyroid gland with Please correct. Further, are there any metastasis in the military column and cervical lymph node? Please add the proper descriptions on these subjects.

Reply: We have changed to "bilobed PTC" and "scalp and skull metastasis". The entire diagnoses have been added to the revised Results and Discussion sections.

3. there are no macroscopic photographs of the resected specimens of primary and metastatic lesions and micrographs of the pathology. Shouldn't this always be necessary in discussing whether the lung or thyroid is the primary site? Therefore, the final diagnosis is suspiciously unreliable.

Reply: A new Figure 2 has been added according to the reviewer's request.

4. Treatment: What exactly are "3 cycles of anlotinib therapy", "self-reported targeted drug therapy" and "iodine-131 therapy" given continuously after surgery in combination with anlotinib? Please describe the drugs, doses and regimens in detail.

Reply: The paragraph has been revised and the missing information added.

5. Please search the literature such as Medline, etc., and list several case reports or case series similar or identical to your submitted case, and please create a new table summarizing their characteristics in terms of age, sex, histological type, treatment, clinical course, prognosis. Furthermore, please consider if there are any common characteristics among these case groups. Please review them and add the description to the "Discussion section.

Reply: We have now added similar case reports and related text to the revised Discussion.

6. Please add a new schematic figure and brief explanations in the "Discussion section" about the mechanism of action of TKI to show anti-tumor effect, so that the readers of WJCC can easily understand it.

Reply: A new Figure 4 has been added to the revised Discussion.

7. Please add one new summarized table explaining the treatment and clinical course of this case for the WJCC readers to understand easily.

Reply: A new Figure 1 has been added to the revised manuscript.

8. I think the "Discussion section" is rather poorly written. #1. Please add the author's own thoughts on the reasons and appropriateness of each treatment procedures selected during the course of this case. #2. Why don't you also add the experimental results showing that anlotinib is effective in PTC in the "Discussion section"? For example, the following review article is detailed and clear: X Ryan, et al. Endocrine-Related Cancer 2019;26:153-164

Reply: #1. We addressed this concern in the revised Discussion; #2. We have now added the reference with appropriate text to the revised Discussion.

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Reviewer #2:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: Thank you for the possibility to review the manuscript titled: "Efficacy of anlotinib combined with radioiodine to treat scalp metastasis of papillary thyroid cancer: A case report and literature review." This is a very rare case of a patient with metastasis to the scalp. There are only incidental reports of such patients in the literature. There are only a few minor recommendations:

"The operation went smoothly and the postoperative recovery of the patient was good", the phrase "went smoothly" is not a valid academic term. I would recommend using "went without complications" or "went without any

particularities” -Please indicate which TI-RADS system was used in the manuscript (Chinese, American Korean or other).

Reply: Thank you for your helpful comments. We have changed “smoothly” to “without complications” and indicated TI-RADS as Chinese with a new reference.

I would recommend adding a small table about vandetanib, cabozantinib, sorafenib and lenvatinib in the discussion section, paying more attention to these drugs. Please take into account the recommendations in the spirit of improving the quality of the submission.

Reply: We have added a new Table 2 with appropriate references to the revised Discussion section accordingly

6 EDITORIAL OFFICE’S COMMENTS

Authors must revise the manuscript according to the Editorial Office’s comments and suggestions, which are listed below:

(1) Science editor:

The manuscript has been peer-reviewed, and it's ready for the first decision.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade B (Very good)

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is

conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before its final acceptance, the author(s) must provide the Signed Consent for Treatment Form(s) or Document(s) (患者治疗/手术同意书或病例首页).

Reply: We have provided the Signed Consent for Treatment Form.

Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2023.

Reply: We have provided the original figure documents as a PowerPoint file.

Please upload the approved grant application form(s) or funding agency copy of any approval document(s).

Reply: We have deleted the supportive foundations.

Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

Reply: Since the present case report is about anlotinib used as neo-adjuvant therapy for PTA skull metastasis, which has not been investigated in other studies, similar articles are not available.