

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70453

Title: Concurrent Ankylosing Spondylitis and Myelodysplastic Syndrome: A Case

Report

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06128473 Position: Peer Reviewer Academic degree: MD, MSc

Professional title: Honorary Research Fellow, Surgeon

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2021-08-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-04 16:13

Reviewer performed review: 2021-08-04 20:57

Review time: 4 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 [] Grade B: Minor language polishing [Y] 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

Lines: 16-17: Should be rephrased 39: recovered from anemia? AS? Case report: subtitles like "chief complaints", "history of present illness" etc are not required 82: but relapsed frequently -> with frequent relapses 83: hospital for -> hospital due to 88: do a bone marrow test -> have a bone marrow test 92: contact with tuberculosis -> contact with patients with tuberculosis 92-93: He had no sexual history -> No sexual history was reported. 99: No dysmorphic features -> No dysmorphic features were observed. Laboratory examinations: several normal exams could be omitted. 129: was -> were 131: On the advice of a rheumatologist -> On the advice of rheumatologists 132: a further -> further 139: the narrowing space of -> narrowing space of 144: (CP Guojian Pharmaceuticals, shanghai, China) do not include 159: suggested the -> suggested 166: After consultation, the hematologist thoughted that MDS was related to AS.-> Following hematology consultation, it was suggested that MDS might be related to AS. 167: have -> had 168: He got a high -> He gresented a high 169: So, -> Subsequently, 172: the Hb level was maintained at 100 g/L for only 1 month -> rephrase 207: however -> thus Why is there no evidence that MDS was secondary to AS? (line 218) I believe that the role of HLA B27 between the 2 diseases should be further discussed. In my oppinion, the text is very long with certain things getting recycled again and again.



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Peer-review model: Single blind

Reviewer's code: 06107956 Position: Peer Reviewer

Academic degree: Doctor, MD, PhD

Professional title: Assistant Professor, Doctor, Lecturer, Postdoc, Postdoctoral Fellow,

Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: China

Manuscript submission date: 2021-08-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-08 02:04

Reviewer performed review: 2021-08-16 19:13

Review time: 8 Days and 17 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	[]Yes [Y]No
Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

A. Comment of Re-viewer AS is a systemic autoimmune disease that damages joints, deforms the spine, and affects the patient's daily activities. AS can cause anemia, but it's usually mild. Therefore, if AS + severe anemia is an abnormality suggestive of a malignancy of the hematopoietic system => This is a finding of this announcement, which has great diagnostic and therapeutic implications. The patient was followed very closely for 3 years (2008 - 2010) with the main symptoms being low back pain and severe anemia. The authors have in turn made many probes such as bone marrow biopsy (3 times), tried to find the association between AS and MDS (gene sequencing, looking for mutations) but have not found any association (at least in this case). That shows the author's diagnostic thinking => meaningful in clinical practice. However, the reviewer said that in this case, AS and MDS are two different diseases in the same patient => Rarity of the clinical case. B. Some suggestions: 1. The article is too long for a clinical case: 2654 words. Therefore, the author should shorten it, shorten it in the CASE PRESENTATION and DISSCISION section. 2. This clinical case took place > 10 years ago, until now announced. Only 5 out of 28 references were published in the last 5 years => the article has not been updated with new knowledge. Will AS + MDS still be rare case? Reviewer recommends the author Update new information, new documents in the DISSCUSION section. 3. The article discussed a perplexing clinical case: does AS cause MDS or does AS cause MDS? The author's efforts thus far have not yielded a clinical case. The essay sends a message to the reader: I AS + severe anemia must be diagnosed as hematopoietic system pathology; and (ii) acute leukemia must be considered for



chemotherapy or bone marrow transplantation (treatment). The author should generalize this finding. C. Conclusion: Major revision



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 06107956 Position: Peer Reviewer

Academic degree: Doctor, MD, PhD

Professional title: Assistant Professor, Doctor, Lecturer, Postdoc, Postdoctoral Fellow,

Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: China

Manuscript submission date: 2021-08-03

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2021-11-24 02:48

Reviewer performed review: 2021-11-24 02:51

Review time: 1 Hour

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) [Y] Accept (General priority) [] 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

Maybe public