

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70605

Title: Diagnostic and Surgical Challenges of Progressive Neck and Upper Back Painless

Masses in Madelung's Disease: A Case Report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00503026

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2021-08-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-19 18:36

Reviewer performed review: 2021-08-19 18:47

Review time: 1 Hour

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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
Re-review	[Y]Yes []No



Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The article: "Progressive Neck and Upper Back Painless Mass: A case report of Madelung's disease" is interesting and well written. I congratulate the authors for this report. I suggest only one correction: 1) To add the number of the proevious cases of Madelung published at literature, with some references.



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Reviewer's code: 06135366

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Lithuania

Author's Country/Territory: China

Manuscript submission date: 2021-08-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-22 07:59

Reviewer performed review: 2021-08-22 10:08

Review time: 2 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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) [Y] Minor revision [] 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

It is a rare case. 1) As we see there is an increasing number of publications about Madelung's disease. Due to its multidisciplinary course, it is valuable to emphasize the aim of the article: dedication for differential diagnosis or treatment. This article explains a developed operation plan to remove the masses. I offer to reflect this in the title. For example, Progressive Neck and Upper Back Painless Mass: Diagnostic and Surgical challenges of Madelung's disease. A case report. Adjustment of keywords (for example, lipectomy) is also recommended. 2) It would be great to explain (shortly) the choice of contrast-enhanced computed tomography scan for diagnosis because it is popular among surgeons to prefer MRI firstly, especially when oncology is suspected. Is it enough for planning a surgeon tactic? 3) The pathogenesis of the disease is a bit confused: in 207-210 lines there is explained that pathogenesis is related to long-term heavy drinking, then there is explained/repeated the same in lines 212-213, I would like to prefer to fix and merge to one base sentence. Also, comorbidities are not part of pathogenesis (line number 211). The place of this sentence has to be changed. 4) This journal has published 3 reports of Madelung's disease, please check again (line number 310). 5) Laboratory findings and other tests have to be prepared/submitted in a table form (Word file type) (Figures S1, S2, S3). What is the aim of the heart ultrasound (S4)? Is it for the differential diagnosis to show comorbidity? 6) The legends of figures are recommended. The 3rd figure has to be remade: all figures in a one-line and the explanations have to be moved to the legend. The same recommendation for the other two figures. It would be great to mark masses in contrast-enhanced computed tomographic images of the patient's neck and chest (by arrows). 7) There are some minor



grammatical and spelling errors, please rectify them.