

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 75533

Title: Rare case of perforated giant gastric ulcer with concurrent thyroid storm: A Case

Report

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03725766

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Singapore

Manuscript submission date: 2022-02-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-04 04:20

Reviewer performed review: 2022-02-06 14:45

Review time: 2 Days and 10 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish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



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

SPECIFIC COMMENTS TO AUTHORS

This manuscript presents an interest case of rare case of perforated giant gastric ulcer with concurrent thyroid storm. The authors concluded that multidisciplinary perioperative management is crucial. There are several concerns about this manuscript. Novelty is lacking. This is an accidental case and the authors do not give us new insights. In my opinion, what diseases do we deal with is that perforation or hyperthyroidism which one is life-threatening.



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Title: Rare case of perforated giant gastric ulcer with concurrent thyroid storm: A Case

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05466208

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor, Research Fellow

Reviewer's Country/Territory: Egypt

Author's Country/Territory: Singapore

Manuscript submission date: 2022-02-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-04 17:13

Reviewer performed review: 2022-02-06 15:03

Review time: 1 Day and 21 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Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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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SPECIFIC COMMENTS TO AUTHORS

comment 1: further grammar and context modifications are needed



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03739881

Position: Peer Reviewer

Academic degree: N/A

Professional title: N/A

Reviewer's Country/Territory: China

Author's Country/Territory: Singapore

Manuscript submission date: 2022-02-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-03 13:00

Reviewer performed review: 2022-02-10 07:01

Review time: 6 Days and 18 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 [] Major revision [] Rejection
Re-review	[Y]Yes []No



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SPECIFIC COMMENTS TO AUTHORS

his case report describes giant gastric ulcer with concurrent thyroid storm who underwent damage control surgery with emergency patch repair with falciform ligament and recovered well. In this case, multidepartment has rescued the patient successfully. My questions and suggestions are as follows: Before surgery, T4 (90.3 pmol/L) and low levels of TSH (0.005 μ U/mL) that suggested primary hyperthyroidism. After Pre-operative management before surgery, Post-operative , there was no dynamic results.