

PEER-REVIEW REPORT

Name of journal: *World Journal of Psychiatry*

Manuscript NO: 80643

Title: Tardive sensory syndrome related to lurasidone: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06275221

Position: Peer Reviewer

Academic degree: MD

Professional title: Director

Reviewer's Country/Territory: United States

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-10-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-14 09:39

Reviewer performed review: 2022-10-14 10:01

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements	Conflicts-of-Interest: [] Yes [Y] No
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SPECIFIC COMMENTS TO AUTHORS

Great case, nicely described with potential mechanisms about the neuro chemical interactions.

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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06290122

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-10-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-13 00:06

Reviewer performed review: 2022-10-16 00:01

Review time: 2 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

This paper reported a case on Lurasidone induced Tardive sensory syndrome (TSS), which is a subtype of tardive syndrome (TS). Notably, this is a rare case in the literature reported. The manuscript is well written and interesting. However, in your paper, you should present the Tardive sensory syndrome on your therapy switching from lurasidone to quetiapine, such as videos. That is to say, how can you make a diagnosis of Tardive sensory syndrome that is induced by Lurasidone.

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Manuscript NO: 80643

Title: Tardive sensory syndrome related to lurasidone: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02832130

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-10-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-12 03:09

Reviewer performed review: 2022-10-20 14:30

Review time: 8 Days and 11 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements	Conflicts-of-Interest: [] Yes [Y] No
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SPECIFIC COMMENTS TO AUTHORS

Title: Tardive sensory syndrome related to lurasidone: A case report Manuscript No. 80643 Name of Journal: World Journal of Psychiatry Manuscript Type: Case Report

Comments: Tardive sensory syndrome (TSS) is a subtype of tardive syndrome (TS). The author of this manuscript reported a 52-year-old woman with schizophrenia developed mandibular sensory (pain) paresthesia after 3 months of administration of lurasidone. This case report reminds clinicians should adopt a cautious approach when prescribing atypical antipsychotics, so as to prevent TS. The subject of this manuscript is of value, but there are defects need to be modified.

1. Abstract section:had taken lurasidone 40-120 mg daily since March 2021..... CASE PRESENTATION section: Consequently, the main regimen was shifted to lurasidone 40-120 mg daily in March 2021. The description of drug dosage is unclear. Please check and reword clearly.
2. CASE PRESENTATION section: A 52-year-old female with no history of medical disease, movement disorders or sensory paresthesia had been diagnosed with schizophrenia since April 2001, and was treated with various antipsychotics, including risperidone 1mg/daily, amisulpride 200mg/daily, quetiapine 200mg/daily, ziprasidone 40mg/daily, and clozapine 125mg/daily, with a duration of a few months, respectively, and olanzapine 10~25mg/daily (June 2013~March 2021), which was fully effective, but was discontinued due to the adverse side effect of weight gain. This sentence is not easy to understand. It is suggested to rewrite it

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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06076106

Position: Editorial Board

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-10-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-12 08:40

Reviewer performed review: 2022-10-24 13:41

Review time: 12 Days and 5 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statementsConflicts-of-Interest: [] Yes [**Y**] No**SPECIFIC COMMENTS TO AUTHORS**

The paper is written in detail. the case report is original as there are no other papers that report the appearance of the late sensory syndrome in relation to the use of Lurasidone. The various parts of the paper (introduction, case study and discussion) are balanced. in the discussion section the authors try to explain in detail the mechanisms of action that could be related to the onset of TSS and lurasidone. Since it is a case report in the conclusions I would be more cautious. Therefore, I would write that further studies are needed to support the hypothesis that Lurasidone may determine the onset of TSS and if other factors may affect.