

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 41042

**Title:** Case report highlighting the importance of early diagnosis in progressive multi-organ involvement of IgG4-related disease

**Reviewer's code:** 00722239

**Reviewer's country:** Japan

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-07-31

**Date reviewed:** 2018-08-02

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This is a case report regarding the multi-organ involvement of IgG4-related disease taking over 19 years for definite diagnosis. Although the case itself is interesting, I have some major comments. First, the manuscript is too long as a single case report.



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Especially, case presentation is too long and too complicated. The readers would feel hard to understand the case. The authors should extensively revise their manuscript more shorten, more simplify and more summarized. Table 1 is too busy and complicated. Only significant and important information should be summarized as Table. The details of date should be noted in manuscript only if it is absolutely important. The authors should present some pathological photographs showing lymphoplasmacytic infiltration and immunohistochemistry of IgG4.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [Y] No

##### ***BPG Search:***

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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 41042

**Title:** Case report highlighting the importance of early diagnosis in progressive multi-organ involvement of IgG4-related disease

**Reviewer's code:** 00502947

**Reviewer's country:** Australia

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-08-14

**Date reviewed:** 2018-08-19

**Review time:** 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

I think the case itself is interesting but the discussion improved and other points addressed. IGG4RD isn't that novel but there are some interesting aspects to this particular case. Spelling, grammar, English expression throughout needs to be

addressed – recommend they get the paper edited Discussion could be improved, see comments. Also they need to emphasise how their patient fits this diagnosis, what was different, what makes this case unusual/interesting rather than leaving the reader to draw this conclusion. This section needs to be improved-focus on the pathophysiology of IGG4RD rather than general basic immunology Some key laboratory investigations (in my opinion!) are missing - i.e. one would imagine they would have done an EPG for IgG paraprotein, also they don't mention any autoantibody testing (ie relating to Sjogrens etc) - even though it does look like IGG4RD, they should mention these relevant negative findings They need to expand on their histological features on the biopsy - did it meet criteria for a diagnosis of IGG4RD? If they have photos, this should be added to the paper The results table should be re-organised as mentioned in the comments Page 2, line 10: 'lymphoplasmacytic infiltration' But did this meet the histopathological criteria for diagnosis of IGG4RD, i.e. positive IGG4 staining on immunohistochemistry? Page 2, line 18: 'multi-organ involvement'. This is not an ideal keyword. Page 3, Line 24: 'rib fracture' Was this a traumatic rib fracture? Did she have investigation for a paraprotein? DDx plasma cell dyscrasia with IgG4 paraprotein. Page 3, line 29: 'a paste' ointment? Page 4, lines 20-22: Better to give absolute numbers as well as percentages. Page 5, line 4: 'Sjoren's syndrome', Any ANA/ENA results? Page 6, line 19: Confirmatory testing is histological. Page 8, 2nd last sentence: How did your patient fulfil these criteria? Table: Recommend re-organising the table, grouping together laboratory/radiographical/clinical features rather than chronological list. Can still give the years but rearrange. Was ANA, ENA done? Evidence of autoantibodies associated with Sjogrens. 2006.3.31 Biopsy: More details needed here, consider photographs of histological findings. 2009.11.13: give absolute numbers as well 2011.11.22: Did you ever do protein electrophoresis for a paraprotein? If so, document this also.

## INITIAL REVIEW OF THE MANUSCRIPT

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- ☐ [Y] No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 41042

**Title:** Case report highlighting the importance of early diagnosis in progressive multi-organ involvement of IgG4-related disease

**Reviewer's code:** 00503066

**Reviewer's country:** Mexico

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-08-14

**Date reviewed:** 2018-08-22

**Review time:** 8 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

The manuscript by Jing Xue et al describes a case report for IgG4-related progressive multi-organ disease. The manuscript is clearly written and very nicely reflects the relationship between IgG4 levels and the clinical condition. Title, abstract, and keywords



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are all consistent with the findings described. The introduction adequately describes the background and the significance of the study. Methods are clear and results are complete and well presented. Discussion section is clear and very informative. This is a very nice report that provides attention to an uncommon but relevant immune disease with multiple clinical manifestations. Just a couple of minor points: In page 3 "She was first diagnosed was "allergic rhinitis" and was externally treated..." It should be She was first diagnosed with "allergic rhinitis" and was externally treated... According to the SI units, the symbol for liter is small l, not capital L. this should be corrected.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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- ☐ [Y] No