

World Journal of *Clinical Cases*

World J Clin Cases 2020 January 6; 8(1): 1-244



REVIEW

- 1 Role of oxysterol-binding protein-related proteins in malignant human tumours
Liu H, Huang S

ORIGINAL ARTICLE**Case Control Study**

- 11 Oncogenic role of Tc17 cells in cervical cancer development
Zhang ZS, Gu Y, Liu BG, Tang H, Hua Y, Wang J

Retrospective Study

- 20 Acute distal common bile duct angle is risk factor for post-endoscopic retrograde cholangiopancreatography pancreatitis in beginner endoscopist
Han SY, Kim DU, Lee MW, Park YJ, Baek DH, Kim GH, Song GA
- 29 Three-dimensional computed tomography mapping of posterior malleolar fractures
Su QH, Liu J, Zhang Y, Tan J, Yan MJ, Zhu K, Zhang J, Li C
- 38 Application of a modified surgical position in anterior approach for total cervical artificial disc replacement
Hou WX, Zhang HX, Wang X, Yang HL, Luan XR
- 46 Potential role of the compound Eucommia bone tonic granules in patients with osteoarthritis and osteonecrosis: A retrospective study
Hu CX, Hu KY, Wang JF
- 54 Prognostic factors for overall survival in prostate cancer patients with different site-specific visceral metastases: A study of 1358 patients
Cui PF, Cong XF, Gao F, Yin JX, Niu ZR, Zhao SC, Liu ZL
- 68 Application of multiple Roux-en-Y hepaticojejunostomy reconstruction by formation of bile hilar duct lake in the operation of hilar cholangiocarcinoma
Yang XJ, Dong XH, Chen SY, Wu B, He Y, Dong BL, Ma BQ, Gao P

Observational Study

- 76 Relationship between β -amyloid protein 1-42, thyroid hormone levels and the risk of cognitive impairment after ischemic stroke
Mao L, Chen XH, Zhuang JH, Li P, Xu YX, Zhao YC, Ma YJ, He B, Yin Y

Prospective Study

- 88 Can the wet suction technique change the efficacy of endoscopic ultrasound-guided fine-needle aspiration for diagnosing autoimmune pancreatitis type 1? A prospective single-arm study
Sugimoto M, Takagi T, Suzuki R, Konno N, Asama H, Sato Y, Irie H, Watanabe K, Nakamura J, Kikuchi H, Takasumi M, Hashimoto M, Kato T, Hikichi T, Notohara K, Ohira H

CASE REPORT

- 97 Pembrolizumab - emerging treatment of pulmonary sarcomatoid carcinoma: A case report
Cimpeanu E, Ahmed J, Zafar W, DeMarinis A, Bardarov SS, Salman S, Bloomfield D
- 103 Sclerosing angiomatoid nodular transformation of the spleen, a rare cause for splenectomy: Two case reports
Chikhladze S, Lederer AK, Fichtner-Feigl S, Wittel UA, Werner M, Aumann K
- 110 Postpartum pubic symphysis diastasis-conservative and surgical treatment methods, incidence of complications: Two case reports and a review of the literature
Norvilaite K, Kezeviciute M, Ramasauskaite D, Arlauskiene A, Bartkeviciene D, Uvarovas V
- 120 Use of omental patch and endoscopic closure technique as an alternative to surgery after endoscopic full thickness resection of gastric intestinal stromal tumors: A series of cases
Sachdev AH, Iqbal S, Ribeiro IB, de Moura DTH
- 126 Primary maxillary chondrosarcoma: A case report
Cuevas-González JC, Reyes-Escalera JO, González JL, Sánchez-Romero C, Espinosa-Cristóbal LF, Reyes-López SY, Tovar Carrillo KL, Donohue Cornejo A
- 133 Hyalinizing clear cell carcinoma-a rare entity in the oral cavity: A case report
Donohue-Cornejo A, Paes de Almeida O, Sánchez-Romero C, Espinosa-Cristóbal LF, Reyes-López SY, Cuevas-González JC
- 140 Jejunal cavernous lymphangioma manifested as gastrointestinal bleeding with hypogammaglobulinemia in adult: A case report and literature review
Tan B, Zhang SY, Wang YN, Li Y, Shi XH, Qian JM
- 149 Large pelvic mass arising from the cervical stump: A case report
Zhang K, Jiang JH, Hu JL, Liu YL, Zhang XH, Wang YM, Xue FX
- 157 Mechanical intestinal obstruction due to isolated diffuse venous malformations in the gastrointestinal tract: A case report and review of literature
Li HB, Lv JF, Lu N, Lv ZS
- 168 Two-level percutaneous endoscopic lumbar discectomy for highly migrated upper lumbar disc herniation: A case report
Wu XB, Li ZH, Yang YF, Gu X

- 175 Successful treatment of congenital palate perforation: A case report
Zhang JF, Zhang WB
- 179 Calcitonin-negative neuroendocrine tumor of the thyroid with metastasis to liver-rare presentation of an unusual tumor: A case report and review of literature
Cai HJ, Wang H, Cao N, Huang B, Kong FL, Lu LR, Huang YY, Wang W
- 188 Giant exophytic cystic adenomyosis with a levonorgestrel containing intrauterine device out of the uterine cavity after uterine myomectomy: A case report
Zhou Y, Chen ZY, Zhang XM
- 194 Unusual presentation of bladder neuroblastoma in a child: A case report
Cai JB, Wang JH, He M, Wang FL, Xiong JN, Mao JQ, Li MJ, Zhu K, Liang JW
- 200 Value of dynamic plasma cell-free DNA monitoring in septic shock syndrome: A case report
Liu JP, Zhang SC, Pan SY
- 208 Sarcomatoid intrahepatic cholangiocarcinoma mimicking liver abscess: A case report
Wang Y, Ming JL, Ren XY, Qiu L, Zhou LJ, Yang SD, Fang XM
- 217 Clinical characteristics on manifestation and gene mutation of a transient neonatal cyanosis: A case report
Yuan J, Zhu XP
- 222 Six families with balanced chromosome translocation associated with reproductive risks in Hainan Province: Case reports and review of the literature
Chen YC, Huang XN, Kong CY, Hu JD
- 234 Primary intestinal extranodal natural killer/T-cell lymphoma, nasal type: A case report
Dong BL, Dong XH, Zhao HQ, Gao P, Yang XJ

LETTER TO THE EDITOR

- 242 Cluster headache as a manifestation of a stroke-like episode in a carrier of the *MT-ND3* variant m.10158T>C
Finsterer J

ABOUT COVER

Editorial Board Member of *World Journal of Clinical Cases*, Maddalena Zippi, MD, PhD, Doctor, Unit of Gastroenterology and Digestive Endoscopy, Sandro Pertini Hospital, Rome 00157, Italy

AIMS AND SCOPE

The primary aim of *World Journal of Clinical Cases (WJCC, World J Clin Cases)* is to provide scholars and readers from various fields of clinical medicine with a platform to publish high-quality clinical research articles and communicate their research findings online.

WJCC mainly publishes articles reporting research results and findings obtained in the field of clinical medicine and covering a wide range of topics, including case control studies, retrospective cohort studies, retrospective studies, clinical trials studies, observational studies, prospective studies, randomized controlled trials, randomized clinical trials, systematic reviews, meta-analysis, and case reports.

INDEXING/ABSTRACTING

The *WJCC* is now indexed in PubMed, PubMed Central, Science Citation Index Expanded (also known as SciSearch®), and Journal Citation Reports/Science Edition. The 2019 Edition of Journal Citation Reports cites the 2018 impact factor for *WJCC* as 1.153 (5-year impact factor: N/A), ranking *WJCC* as 99 among 160 journals in Medicine, General and Internal (quartile in category Q3).

RESPONSIBLE EDITORS FOR THIS ISSUE

Responsible Electronic Editor: *Yan-Xia Xing*

Proofing Production Department Director: *Yun-Xiaojuan Wu*

NAME OF JOURNAL

World Journal of Clinical Cases

ISSN

ISSN 2307-8960 (online)

LAUNCH DATE

April 16, 2013

FREQUENCY

Semimonthly

EDITORS-IN-CHIEF

Dennis A Bloomfield, Bao-Gan Peng, Sandro Vento

EDITORIAL BOARD MEMBERS

<https://www.wjnet.com/2307-8960/editorialboard.htm>

EDITORIAL OFFICE

Jin-Lei Wang, Director

PUBLICATION DATE

January 6, 2020

COPYRIGHT

© 2020 Baishideng Publishing Group Inc

INSTRUCTIONS TO AUTHORS

<https://www.wjnet.com/bpg/gerinfo/204>

GUIDELINES FOR ETHICS DOCUMENTS

<https://www.wjnet.com/bpg/GerInfo/287>

GUIDELINES FOR NON-NATIVE SPEAKERS OF ENGLISH

<https://www.wjnet.com/bpg/gerinfo/240>

PUBLICATION MISCONDUCT

<https://www.wjnet.com/bpg/gerinfo/208>

ARTICLE PROCESSING CHARGE

<https://www.wjnet.com/bpg/gerinfo/242>

STEPS FOR SUBMITTING MANUSCRIPTS

<https://www.wjnet.com/bpg/GerInfo/239>

ONLINE SUBMISSION

<https://www.f6publishing.com>

Cluster headache as a manifestation of a stroke-like episode in a carrier of the *MT-ND3* variant m.10158T>C

Josef Finsterer

ORCID number: Josef Finsterer (0000-0003-2839-7305).

Author contributions: Finsterer J performed research, literature search, discussion, first draft, critical comments.

Conflict-of-interest statement: The authors declare that they have no conflict of interest.

Open-Access: This article is an open-access article which was selected by an in-house editor and fully peer-reviewed by external reviewers. It is distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited and the use is non-commercial. See: <http://creativecommons.org/licenses/by-nc/4.0/>

Manuscript source: Unsolicited manuscript

Received: August 30, 2019

Peer-review started: August 30, 2019

First decision: December 12, 2019

Revised: December 19, 2019

Accepted: December 22, 2019

Article in press: December 22, 2019

Published online: January 6, 2020

P-Reviewer: Kvolik S

S-Editor: Zhang L

L-Editor: A

E-Editor: Xing YX

Josef Finsterer, Neurological Department, Messerli Institute, Vienna 1180, Austria

Corresponding author: Josef Finsterer, MD, PhD, Attending Doctor, Neurological Department, Messerli Institute, Danube Univ Krems, Postfach 20, Vienna 1180, Austria. fifigs1@yahoo.de

Abstract

In a recent article Fu *et al* reported about a 52 years old female with a mitochondrial disorder due to the variant m.10158T>C in the mtDNA located gene *MT-ND3*. The study has a number of shortcomings. The study would particularly profit from providing more data about multisystem disease, from providing the current medication, the cerebro-spinal fluid findings, the detailed phenotypic presentation, and the genotype of first-degree relatives. Since the index patient had experienced recurrent seizures it is crucial to know the current and previous anti-seizure medication as it may strongly determine the outcome. Some of them are mitochondrion-toxic and particularly valproic acid may exhibit fatal side effects. The outcome may also depend on the degree of multisystem involvement why it is crucial to prospectively investigate the patient for subclinical involvement of organs not obviously affected. Additionally, the outcome of the stroke-like lesions on imaging would be interesting to see. Stroke-like lesions may completely disappear or may end up as white matter lesion, laminar cortical necrosis, focal atrophy, cyst, or as the so-called toenail sign. There is also a need of discussing more profoundly the imaging findings and their diagnostic significance and to investigate first degree relatives of the index patient clinically and genetically. Though highly interesting, the presentation of this case of a mitochondrial disorder lacks clinical and genetic data of the patient and his relatives. Outcome parameters, such as severity of disease, degree of progression, drugs, pathogenicity of the mutation, and multisystem involvement require a profound discussion.

Key words: Heteroplasmy; mtDNA; Oxidative phosphorylation; Stroke-like episode

©The Author(s) 2020. Published by Baishideng Publishing Group Inc. All rights reserved.

Core tip: The recent report about a 52 years old female with a mitochondrial disorder due to the variant m.10158T>C in *MT-ND3* may profit from a more thorough investigation of the index case and his relatives. Outcome parameters, such as severity of disease, degree of progression, drugs, pathogenicity of the mutation, and multisystem involvement need to be assessed to guide treatment and genetic counselling.



Citation: Finsterer J. Cluster headache as a manifestation of a stroke-like episode in a carrier of the *MT-ND3* variant m.10158T>C. *World J Clin Cases* 2020; 8(1): 242-244

URL: <https://www.wjnet.com/2307-8960/full/v8/i1/242.htm>

DOI: <https://dx.doi.org/10.12998/wjcc.v8.i1.242>

TO THE EDITOR

In a recent article, Fu *et al*^[1] reported about a 52 years female with a mitochondrial disorder (MID) due to the variant m.10158T>C in *MT-ND3*. The patient manifested phenotypically with recurrent stroke-like episodes, cluster headache, and epilepsy. We have the following comments and concerns.

We do not agree with the statement that the m.10158T>C variant in *ND3* is a common mutation^[1]. When searching PubMed for this particular mtDNA variant only five hits could be achieved. Thus, the variant m.101157T>C has to be classified as a rare variant.

Since the index patient had undergone a spinal tap, we should know if cerebrospinal fluid (CSF) lactate was elevated or not upon investigations of the CSF.

Since up to 75% of the mtDNA variants are transmitted *via* a maternal line of inheritance^[2], we should know if the mother or any other first degree relative was clinically affected and if the mtDNA variant m.10158T>C was detected in any of the other first degree relatives.

Stroke-like lesions (SLLs) in the acute/expanding stage typically manifest with hyperperfusion on single-photon emission computed tomography or perfusion weighted imaging. Thus, we should know if perfusion weighted imaging was applied and if hyperperfusion could be detected. It is also crucial to demonstrate reduced oxygen extraction within the SLL by means of oxygen extraction fraction-MRI. Was this technique applied and was there reduced oxygen extraction?

Since SLLs may disappear without any remnants on MRI, or may end up as white matter lesion, laminar cortical necrosis, cysts, or the toenail-sign^[3], we should know the outcome of the various SLLs in this patient. Which were the results of the long-term follow-up on MRI?

The index patient obviously did not only manifest in the cerebrum (SLLs, seizures, cognitive impairment) but also in the endocrine system (short stature), and the heart (atrial fibrillation). Since patients with a MID most frequently manifest with multisystem disease^[4], we should know if the index patient was prospectively investigated for manifestations of the genotype in organs other than the brain and the endocrine organs. We also should be informed why the patient received oral anticoagulation with a vitamin-K antagonist. Was this due to atrial fibrillation, heart failure, or valve replacement therapy?

Missing is the current medication of the patient. Since the patient had experienced recurrent seizures, it is crucial to know the antiepileptic drug (AED) regimen. Since some of the AEDs are potentially mitochondrion-toxic^[5] we should know if recurrence of seizures and SLLs could be attributed at least in part to the application of mitochondrion-toxic AEDs or to in-effectivity of the AEDs.

Cluster headache had been occasionally reported as a manifestation of a MID^[6,7]. Did cluster headache in the index patient resolve upon application of widely agreed therapies for cluster headache?

Overall, this interesting case could be more meaningful by providing more data about multisystem disease, the current medication, the CSF findings, the phenotype and genotype of other first-degree relatives, outcome of the SLLs on imaging, and by discussing more profoundly the imaging findings and their significance.

REFERENCES

- 1 Fu XL, Zhou XX, Shi Z, Zheng WC. Adult-onset mitochondrial encephalopathy in association with the *MT-ND3* T10158C mutation exhibits unique characteristics: A case report. *World J Clin Cases* 2019; 7: 1066-1072 [PMID: 31123680 DOI: 10.12998/wjcc.v7.i9.1066]
- 2 Poulton J, Finsterer J, Yu-Wai-Man P. Genetic Counselling for Maternally Inherited Mitochondrial Disorders. *Mol Diagn Ther* 2017; 21: 419-429 [PMID: 28536827 DOI: 10.1007/s40291-017-0279-7]
- 3 Finsterer J. Mitochondrial metabolic stroke: Phenotype and genetics of stroke-like episodes. *J Neurol Sci* 2019; 400: 135-141 [PMID: 30946993 DOI: 10.1016/j.jns.2019.03.021]
- 4 Nesti C, Rubegni A, Tolomeo D, Baldacci J, Cassandrini D, D'Amore F, Santorelli FM. Complex multisystem phenotype associated with the mitochondrial DNA m.5522G>A mutation. *Neurol Sci* 2019; 40: 1705-1708 [PMID: 30937556 DOI: 10.1007/s10072-019-03864-w]

- 5 **Finsterer J.** Toxicity of Antiepileptic Drugs to Mitochondria. *Handb Exp Pharmacol* 2017; **240**: 473-488 [PMID: 27590225 DOI: 10.1007/164_2016_2]
- 6 **Montagna P,** Cortelli P, Barbiroli B. A case of cluster headache associated with mitochondrial DNA deletions. *Muscle Nerve* 1998; **21**: 127-129 [PMID: 9427236 DOI: 10.1002/(sici)1097-4598(199801)21:1<127::aid-mus21>3.0.co;2-#]
- 7 **Odawara M,** Tamaoka A, Mizusawa H, Yamashita K. A case of cluster headache associated with mitochondrial DNA deletions. *Muscle Nerve* 1997; **20**: 394-395 [PMID: 9052829 DOI: 10.1002/mus.880200307]



Published By Baishideng Publishing Group Inc
7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-2238242
E-mail: bpgoffice@wjgnet.com
Help Desk: <https://www.f6publishing.com/helpdesk>
<https://www.wjgnet.com>

