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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 54270

Title: Intravascular lymphoma with hypopituitarism: A case report

Reviewer's code: 03251421
Position: Editor-in-Chief
Academic degree: MD
Professional title: Professor
Reviewer's Country/Territory: China
Author's Country/Territory: Japan

Manuscript submission date: 2020-01-20
Reviewer chosen by: Ruo-Yu Ma
Reviewer accepted review: 2020-02-25 13:43
Reviewer performed review: 2020-03-02 08:46
Review time: 5 Days and 19 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Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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	[ ] Yes [ ] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

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The authors presented a well-organized case report with sufficient medical records. However, in the part of OUTCOME AND FOLLOW-UP, a brief supplement of the endocrinological condition may make the case more complete. In addition, in the part of CONCLUSION, “earlier disease stage” was mentioned in the manuscript, but what is defined as “earlier”? Is the definition of "earlier" based on the IVL severity or pituitary damage?

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Name of journal: World Journal of Clinical Oncology

Manuscript NO: 54270

Title: Intravascular lymphoma with hypopituitarism: A case report

Reviewer's code: 03548820
Position: Peer Reviewer
Academic degree: MD, PhD

Professional title: Doctor, Senior Scientist

Reviewer's Country/Territory: Russia

Author's Country/Territory: Japan

Manuscript submission date: 2020-01-20

Reviewer chosen by: Jie Wang

Reviewer accepted review: 2020-03-12 10:45

Reviewer performed review: 2020-03-13 15:19

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Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[ ] Yes [ ] No
Peer-reviewer statements	Peer-Review: [ ] Anonymous [Y] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

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The authors present an interesting case of intravascular lymphoma (IVL) with pituitary damage. However, significant revision of the manuscript is required: 1) Although IVL is B-cell in most cases, cases of T- and NK-cell intravascular lymphomas have also been described. The authors do not give the results of an immunohistochemical study, which is necessary, especially since the patient was treated with rituximab. 2) The authors correctly emphasize the importance of random skin biopsy for the diagnosis of IVL. Histological examination of the bone marrow is performed. Trephine biopsy of bone marrow can also indicate IVL. Here, were there any histological signs of bone marrow lesion IVL? 3) Biochemical data are lacking. Was there an increase in LDH? 4) Hemophagocytic lymphohistiocytosis (HLH) diagnosis requires a complex of diagnostic criteria [Filipovich and Chandrakasan, Hematol Oncol Clin N Am 29 (2015) 895–902]. Despite hemophagocytosis in bone marrow, fever and cytopenia in the patient, this is not enough to diagnose HLH.