



### PEER-REVIEW REPORT

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

**Manuscript NO:** 57863

**Title:** Twenty-year survival after iterative surgery for metastatic renal cell carcinoma: A case report and review of literature

**Reviewer's code:** 04367479

**Position:** Editorial Board

**Academic degree:** MBBS, MD

**Professional title:** Assistant Professor, Surgeon

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2020-06-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-06-26 20:41

**Reviewer performed review:** 2020-06-30 18:23

**Review time:** 3 Days and 21 Hours

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 Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



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#### **SPECIFIC COMMENTS TO AUTHORS**

The authors have presented a very unusual case here and must be commended for the perseverance that they have shown in managing this case, requiring multiple difficult surgeries. The case is well written and the illustrations are also good. One of the key highlights of this case is that non-surgical therapies still fall short of curative treatment and the role of a surgeon in management of RCC is pivotal. There are 2 main takeaways from this report: (1) metachronous metastasis in RCC have a tendency to present late and require a regular follow up, particularly with cross sectional imaging, and (2) a combination of surgical resection, local ablation and systemic therapies have enabled organ preservation in case of multiple visceral metastasis. The conclusion is very long and should be abbreviated highlighting the takeaways from this paper. The remaining text is well written. A similar but less aggressive case has been reported recently by Yadav et al. (DOI: 10.4103/0974-7796.171501) and may be mentioned to give a broader outlook on the rare but diverse presentation of metachronous metastases in RCC.