

## PEER-REVIEW REPORT

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

**Manuscript NO:** 58029

**Title:** Magnetic resonance imaging findings of carcinoma arising from anal fistula: A retrospective study in a single institution

**Reviewer's code:** 03714071

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2020-07-19

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-07-19 16:54

**Reviewer performed review:** 2020-07-21 16:14

**Review time:** 1 Day and 23 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The paper entitled “Magnetic Resonance Imaging Findings of Carcinoma Arising from Anal Fistula: A Report of 10 cases in a Single Institution” is well written and I think that this study is very interesting because it provides useful information with MRI findings about anal carcinoma arising from anal fistula, resulting in faster times for diagnosis and treatment and consequently better prognosis for patients. The title reflects the main hypothesis of the manuscript. The abstract is adequate to summarize the work described in the manuscript. The key words reflect the focus of the study. The Background is adequately described, even if I suggest to add these two references: “MRI of anal canal: common anal and perianal disorders beyond fistulas: Part 2. Erden A. Abdomen Radiol (NY) 2018; 43(6):1353-1367” and “MRI evaluation of anal and perianal diseases. Balci S, et al. Diagnost Interv Radiol 2019; 25(1): 21-27”. These manuscripts are useful because provide more information about MRI. The authors assert that MRI has been recommended as the modality of choice to stage anal cancer, taking into account the maximum tumor diameter, invasion of adjacent structures and regional lymph node involvement. Diffusion weighted imaging (DWI) is being incorporated into anal cancer MRI protocol because it enables improved tissue characterization, monitoring treatment response after chemoradiation therapy and differentiating suspected residual or recurrent tumor from treatment-related changes. Moreover, an increased signal on DWI can be an evidence to predict the presence of malignant tissue. Methods and Results are described in adequate detail. In the Discussion section, • It could be interesting to study more detailed the perturbation of surgery as a risk factor for the malignant transformation of fistulas, but unfortunately data for this investigation are not sufficient in this manuscript. • A long-term follow-up could be useful to detect if “the fistula showed usually antedate the carcinoma by at least 10 years” and this could make the

study stronger. • The sample size is too small, as the authors declare and this could be a great limitation for the scientific value of the research. Illustrations and Tables are appropriate and of good quality. The statistical research is poor. References are up to date. The manuscript is concisely and coherently organized. Style, language and grammar are accurate and appropriate. The manuscript meets the requirements of ethics.

Major revision