



### PEER-REVIEW REPORT

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

**Manuscript NO:** 63820

**Title:** Effective Treatment of polyneuropathy, organomegaly, endocrinopathy, M-protein, skin changes Syndrome with Congestive Heart Failure: A Case Report

**Reviewer's code:** 05466290

**Position:** Editorial Board

**Academic degree:** MSc, RN

**Professional title:** Director, Research Scientist, Senior Lecturer, Senior Researcher

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

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

**Manuscript submission date:** 2021-03-08

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-03-11 07:17

**Reviewer performed review:** 2021-03-11 07:24

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input 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



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

This is a case report for a 23-year-old Chinese woman with POEMS syndrome and heart failure. This case provides information about treatment of POEMS syndrome with complications and highlights the challenges of developing a standardized treatment. This case reports unique findings and is theoretically based on the current literature. The subject is very important to clinical medical practice. The paper is well written and provides useful information for the readers.



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**Title:** Effective Treatment of polyneuropathy, organomegaly, endocrinopathy, M-protein, skin changes Syndrome with Congestive Heart Failure: A Case Report

**Reviewer's code:** 03498422

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-03-08

**Reviewer chosen by:** Man Liu

**Reviewer accepted review:** 2021-03-09 13:58

**Reviewer performed review:** 2021-03-12 15:03

**Review time:** 3 Days and 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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#### **SPECIFIC COMMENTS TO AUTHORS**

The Authors report an interesting case of POEMS syndrome and a concise literature review. I would suggest to improve the manuscript by addressing the following points.

-There are no data about the cardiological therapy given to the patient. Were B-blockers and ACEi/sartans prescribed? Please specify -There are no Figures about echo, ECG or CMR. -There are no data about CMR, apart from a very concise sentence "Cardiac MRI showed interstitial edema of the myocardium". Did it confirm a moderate LV systolic dysfunction? What about LGE? what about T1/T2? -Please spell out the PBSCT abbreviation in the introduction -The English verbs used to describe the case show be revised, in particular the use of past tenses (e.g. I would suggest: the patient "had been" diagnosed with type I diabetes 9 years "before"...). Similarly, in the paragraph about physical examination, the Authors moved from a past tense to a present tense... please revise carefully.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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

**Manuscript submission date:** 2021-03-08

**Reviewer chosen by:** Man Liu

**Reviewer accepted review:** 2021-04-06 06:53

**Reviewer performed review:** 2021-04-06 06:57

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<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



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No further comments



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**Reviewer chosen by:** Man Liu

**Reviewer accepted review:** 2021-04-06 07:27

**Reviewer performed review:** 2021-04-09 10:43

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

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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The Authors addressed most points and improved the manuscript. Still some points should be clarified: In the manuscript, the Authors report that "LGE could represent definite myocardial necrosis (Fig. 3)", but actually I can't see it (I only spot midwall septal LGE, which is otherwise consistent with their hypothesis of extracellular oedema).

In Fig 3, they reported a T2 map, but they did not indicate whether and where T2 values were increased. Did they mirror native T1 changes? Did they calculate also ECV map? Was the hypothesized extracellular remodelling confirmed by ECV calculation?

In table 1, "Hb = 85 g/dL". Please revise.