



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64559

Title: Primary pancreatic paraganglioma harboring lymph node metastasis

Reviewer's code: 05458177

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Indonesia

Author's Country/Territory: China

Manuscript submission date: 2021-02-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-03-03 02:26

Reviewer performed review: 2021-03-03 04:35

Review time: 2 Hours

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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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7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

The manuscript was well written. The author should add more discussion on diagnostic strategy for these asymptomatic cases, and its differential diagnosis



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64559

Title: Primary pancreatic paraganglioma harboring lymph node metastasis

Reviewer's code: 05776522

Position: Peer Reviewer

Academic degree: MD

Professional title: Attending Doctor, Doctor, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-02-24

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-04-11 12:32

Reviewer performed review: 2021-04-13 19:20

Review time: 2 Days and 6 Hours

Scientific quality	<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
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	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

I would like to congratulate the authors for drafting such an interesting case report and also explaining in detail the epidemiology, diagnosis and management of pancreatic paragangliomas in their manuscript. I believe the manuscript is in need of minor language polishing, and also needs to be more concise. Otherwise overall very well written.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64559

Title: Primary pancreatic paraganglioma harboring lymph node metastasis

Reviewer's code: 02861019

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Assistant Professor, Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-02-24

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-04-16 23:25

Reviewer performed review: 2021-04-16 23:32

Review time: 1 Hour

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

i really appreciate this case report. The Authors reported a unique presentation of a pancreatic paraganglioma. CT, EUS and pathology images are impressive. Therefore, I suggest to accept this case report as it is.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64559

Title: Primary pancreatic paraganglioma harboring lymph node metastasis

Reviewer's code: 05429162

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor, Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-02-24

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-04-11 23:50

Reviewer performed review: 2021-04-22 12:49

Review time: 10 Days and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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

Summary Jiang et al. reported a clinical case of paraganglioma harboring lymph node metastasis. Although the case described in the manuscript is rare, I'm afraid that I cannot recommend this article for publication. Major points [CASE PRESENTATION- history of past illness] 1) In this section, it is important to describe that the patient had a hyperparathyroidism or pituitary adenoma, to exclude the possibility that the patient has a MEN-1 related disease (Kihara et al. *Endocr J.* 2009;56(5):649-56. doi: 10.1507/endocrj.k08e-265; Machens et al. *Clin Endocrinol (Oxf).* 2007 Oct;67(4):613-22. doi: 10.1111/j.1365-2265.2007.02934.x.) [CASE PRESENTATION- imaging examinations] 1) Indeed, the CT imaging is important for making diagnosis of NETs, however, it cannot be exclude other hypervascular tumor, such as metastatic carcinoma, pancreatic cystadenoma. (Nakamura et al. *Clin Case Rep.* 2020 Dec 25;9(2):932-937. doi: 10.1002/ccr3.3691; Okumura et al. *Mol Clin Oncol.* 2018 May;8(5):675-682. doi: 10.3892/mco.2018.1598). For making differential diagnosis, the Magnetic Resonance Imaging (MRI) is important. Please describe the imaging result of MRI. 2) The term "neuroendocrine tumor (NET)" should be reconsidered, according to the latest WHO guidelines. If the author diagnosed the lesion as neuroendocrine neoplasm with the Ki-67 proliferative index up to 20%, the lesion should be described as pancreatic neuroendocrine tumor Grade 1/2 (panNET G1/2). On the other hand, if the author diagnosed the lesion as neuroendocrine neoplasm without any information about the Ki-67 proliferative index, the lesion should be described as pancreatic neuroendocrine neoplasms (panNEN; WHO Classification of Tumours Editorial Board; Digestive System Tumours, WHO Classification of Tumours. 5th ed. Lyon, France: IARC Press; 2019). [CASE PRESENTATION- further diagnostic work-up] 1) The author should describe the FNA pathological findings with Ki-67 proliferative index and positive/negative staining for immunohistochemistry, such as chromogranin A, CD56 and synaptophysin.



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These findings are crucial for diagnosing as neuroendocrine tumor/carcinoma. They also should be described as in the figures (Falconi et al. *Neuroendocrinology*. 2016;103(2):153-71. doi: 10.1159/000443171). [TREATMENT] 1) There is no official name of the disease of “NET with borderline-malignancy”. It should be precisely described according to the WHO guideline, especially in the surgically resected specimen (WHO Classification of Tumours Editorial Board; *Digestive System Tumours*, WHO Classification of Tumours. 5th ed. Lyon, France: IARC Press; 2019). 2) There is several risk stratification score has been reported in the previous literature. Please describe the risk score of this case (Kimura et al. *J Clin Med*. 2018 Aug 27;7(9):242. doi: 10.3390/jcm7090242). [DISCUSSION] 1) The authors described the 19 cases of pancreatic paraganglioma which were previously reported. Details of these cases in terms of their prognosis, treatment, imaging features and preoperative diagnosis should be described and making a summary table. 2) In this section, the authors describe the clinical imaging features and clinical manifestation of the pancreatic paraganglioma, however, there is very few references to support the authors’ story, although the disease is relatively rare.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64559

Title: Primary pancreatic paraganglioma harboring lymph node metastasis

Reviewer's code: 05429162

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor, Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-02-24

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-05-21 13:08

Reviewer performed review: 2021-05-21 13:30

Review time: 1 Hour

Scientific quality	<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
Language quality	<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
Conclusion	<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
Peer-reviewer statements	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

Summary Jiang et al. reported a clinical case of paraganglioma harboring lymph node



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metastasis. The paper provides very interesting data but it still needs a considerable revision to be acceptable for the World Journal of Clinical Cases. [TREATMENT] 1)

There is confusion of the diagnosis with neuroendocrine tumor and paraganglioma. If the patient was diagnosed with paraganglioma preoperatively, the authors should describe the preoperative diagnosis as pancreatic neuroendocrine tumor G1(panNET G1). Also, if the authors diagnosed as paraganglioma in the pancreas from surgical specimens, the GAPP score should be described in the outcome and follow-up section, or move the final diagnosis section after the treatment section. [DISCUSSION]t 1) The authors added the imaging findings for making differential diagnosis of paraganglioma/neuroendocrine tumor. However, the typical imaging findings of these tumors should be described.