

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 70315

Title: Ultrasound-guided needle release plus corticosteroid injection of superficial radial nerve: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06006212

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-08-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-18 09:39

Reviewer performed review: 2021-08-22 01:15

Review time: 3 Days and 15 Hours

| | |
|--------------------|---|
| Scientific quality | <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 Grade E: Do not publish |
| 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 |
|-------------------------------------|---|

SPECIFIC COMMENTS TO AUTHORS

Thank you very much for letting me contribute to this scientific and clinical achievement. This report is fascinating in part they healed the patient even after unsuccessful surgical treatment with less invasive method. I assume the mental stress of this patient had been significant, seeing the denial to the further surgical intervention. This management plan deserves celebration and I am happy for the patient. Although the authors demonstrated an interesting idea, there seem to be several concerns to be addressed. Firstly, the diagnostic process of traumatic neuroma was unclear. The authors started this report with an already determined diagnosis, where readers are not on the same page. Traumatic injuries can cause varieties of neurologic complications. Thus, the logical flow of decision-making, why the authors expected the local injection technique to work, should be clearly stated. Perhaps the definite diagnosis is not integral here. This treatment could work in any kind of neural adhesion. If so, that should be mentioned in Discussion anyway. Secondly, the follow-up period is not certainly appropriate. This patient felt numbness and tingling sensation four months after the first surgical treatment. In contrast, the symptomatic improvement was evaluated four weeks after the local injection. He might have presented the symptoms again later. Readers want to know how long that effect would last.