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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 73603

Title: Cutaneous Metastasis from Esophageal Squamous Cell Carcinoma: A Case Report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05604310 Position: Peer Reviewer Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-11-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-28 12:59

Reviewer performed review: 2021-12-04 19:00

Review time: 6 Days and 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors reported a patient of metastatic esophageal cancer who developed unusual patterns of cutaneous metastasis. Since cutaneous metastases from esophageal carcinoma are rare, the topic addressed is interesting. However, this reviewer would suggest a considerable revision to be acceptable for World Journal of Clinical Cases. 1. The title should contain "cutaneous" or "skin" to clarify the main point of this manuscript. 2. The abstract should be rewritten thoroughly since the time series of the proposed publication does not appear clearly. Besides, several grammatical errors were observed in this section (e.g. "symptoms were relived .After that," or "did not undergo a regular chest lesion review, and returned home"). 3. From the perspective of privacy protection policy, the date of death should be deleted. 4. Due to pleural effusion and its uptake of FDG in PET-scan, the patient was diagnosed with Stage IVB. However, these findings occur in benign diseases. Was cytology from pleural effusion examined? 5. In the Figure 1, images of stomach seem unnecessary. This reviewer would suggest to omit these images. 6. The dose of S-1 plus cisplatin seems relatively low. Was dose reduction performed or was this dosage based on previous reports? 7. Figure 4 contains too many images. In addition, C and C4 were partially cut off. 8. Although the authors cited the results of a phase II study of nivolumab (ref 3), this is not appropriate and the better reference here is Kudo, et al. (Lancet Oncol. 2017). 9. In the manuscript, it was stated that immunotherapy would be less effective due to poor immune function for patients with skin metastasis. However, it appears overstated because this outcome is not validated enough. 10. There were several errors especially when using a space (e.g. "the patient s symptoms were relived .After that," (Page 1) or "the estimated number of esophageal carcinoma cases in 2015 was 0.37 million(2)" (Page 2)). The manuscript should be



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rechecked.



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Reviewer's code: 05400038 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Doctor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-11-27

Reviewer chosen by: AI Technique

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Reviewer performed review: 2021-12-17 11:41

Review time: 10 Days and 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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SPECIFIC COMMENTS TO AUTHORS

1. Care must be taken not to identify any personal information from the date in the text or the information in the image. 2. The interpretation of the pathology results is important, but there are no detailed comments. In addition, there is a lack of description of the evidence that the cancer was not primary skin cancer but metastatic. In particular, please provide detailed descriptions of the pathological findings and immunostaining. 3.One feature of this case seems to be the characteristic skin metastasis findings. It would be interesting to discuss the characteristics of skin metastasis of esophageal cancer and other cancers in the literature. 4. There are many stained images, but are all the slides necessary for diagnosis? 5. Figure 4 has too many images. It is not really related to the main purpose of this case, so it would be better to narrow down the images.