

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 74082

Title: A giant retroperitoneal liposarcoma treated with radical conservative surgery: a clinical report.

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02861333

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2022-01-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-06 14:10

Reviewer performed review: 2022-01-09 13:07

Review time: 2 Days and 22 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 Grade E: Do not publish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 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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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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

Did not show the Figure 2 Preoperative computed tomography scan, and the intraoperative picture.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03031470

Position: Editorial Board

Academic degree: FACS, MD

Professional title: Professor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: United States

Author's Country/Territory: Italy

Manuscript submission date: 2022-01-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-10 15:21

Reviewer performed review: 2022-02-10 21:04

Review time: 5 Hours

Scientific quality	<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
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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous
	Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No

SPECIFIC COMMENTS TO AUTHORS

A giant retroperitoneal liposarcoma treated with radical conservative surgery: Case report. The above mentioned case report was reviewed and the aim of the following comments are only to assist the authors improve on their manuscript for this case report to be useful for readers. Retroperitoneal sarcomas are rare diseases so the case report is will be of interest to the readers; however there are previous larger retroperitoneal sarcomas that have been reported. You mentioned the multidisciplinary team recommended surgery upfront, but you did not mention the metastatic work up, which is mandatory before any aggressive surgical resection with a curative intent. Did you have a whole body scan; especially did you image the lungs for any metastatic lesions. You mentioned MDM2 amplification very briefly, in fact this is one tumor marker specific for liposarcoma and you should describe a bit more on this tumor marker for the readers. Further you mentioned this was well differentiated tumor, addition of pathologic slides will also benefit the readers specially when describing a rare tumor. Further what was the final tumor staging for sarcoma? That is important for the readers and for this patient too, to determine the need for follow up adjuvant radiation or surveillance as these sarcomas have a very high recurrence rates. You could also add a brief discussion on the latest types of neoadjuvant or adjuvant therapies for these tumors.

Your surgical management mentioned resection of the tumor only. This is a rare phenomenon for retroperitoneal sarcomas and in majority of cases the capsule for a liposarcoma is nonexistent which differentiates the tumor from benign lipoma. This patient was fortunate. Commonly these tumor, specifically have fronds and involve the ureters, kidney, bowel mesentery as all these structures arise in the retro-peritoneum. In



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addition for surgical management of these tumors, it is generally described to use peri-operative ureteral stents to identify the ureters and prevent risk of injury to ureters during dissection. Did you all consider that in preoperative planning and preparation? Further this case also emphasizes the awareness when dealing with abdominal scrotal masses, all inguinal bulges are not straightforward hernias and the surgeons need to be suspicious of a hard mass in the inguinal scrotal region as a sarcoma. Had this patient not obtained a second opinion and further imaging, the prior group of surgeons would have a big problem in their hand if they had operated on his groin assuming this was a hernia. Therefore you could also add a brief discussion on the differential diagnosis on abdomino-inguinoscrotal swelling.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02842351

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2022-01-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-15 07:36

Reviewer performed review: 2022-02-15 07:50

Review time: 1 Hour

Scientific quality	<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
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
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

The author report a case of a large retroperitoneal tumor that was treated surgically. This case report does not provide sufficient reference for clinical practice. And this case is not unique enough

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00503572

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Professor

Reviewer's Country/Territory: Mexico

Author's Country/Territory: Italy

Manuscript submission date: 2022-01-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-11 22:53

Reviewer performed review: 2022-02-16 00:12

Review time: 4 Days and 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 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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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

The manuscript entitled "A giant retroperitoneal liposarcoma treated with radical conservative surgery: Case report" is the description of an interesting case report of a patients with retroperitoneal liposarcoma who was successfully treated with surgical resection. Although this type of tumor is rare in the general context, it represents the most frequent tumor of mesenchymal tissue. The preoperative clinical course of the tumor of this patient is typical. This tumor is frequently associated with few symptoms until it reaches large dimensions. Diagnosis is late in most cases. Fortunately, most of these tumors are of low histological malignancy or well differentiated which leads infrequently to distant metastases. The treatment is fundamentally surgical and when it is well differentiated and encapsulated the prognosis is good. The usefulness of preoperative radiation therapy and chemotherapy as mentioned by the authors is controversial. The clinical case described in this text does not provide new or relevant data. However, its diffusion is important due to the overwhelming nature of the diagnosis and its relative rarity. I suggest the authors to provide the following points: 1.

A picture of the histological aspect of the post-surgical piece of the case described 2.

Delve deeper into the description of the different histological types of liposarcomas (myxoid, pleomorphic, round cell, dedifferentiated and well differentiated), 3. The explanation of the probability that this patient will have local recurrence and what would be its management if this occurs