

# PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 74484

**Title:** Primary ascending colon cancer accompanying skip metastases in left shoulder skin and left neck lymph node: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05461735

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor, Surgeon

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

Manuscript submission date: 2022-01-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-03 01:59

Reviewer performed review: 2022-02-05 06:16

Review time: 2 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish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



# Baishideng

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA Telephone: +1-925-399-1568 E-mail: bpgoffice@wjgnet.com https://www.wjgnet.com

Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

The authors reported a case with skip nodal metastases of colon cancer to the neck nodes. Although it is interesting, the detail the authors provided is not completed. They should give the readers missing crucial information. Title and Abstract -There was confusing where the tumor was (cecum vs. ascending colon). The authors stated differently on many parts of this manuscript. Introduction -Too short introduction. Just one sentence mentioned previous knowledge. Please review more previous literature about skip metastasis lymph nodes. Case presentation -Please show the picture of mass on the left shoulder. It is the key in this case report. -This patient had colon cancer at a very young age. Please mention about family history of colon cancer. He might have hereditary colorectal cancer. -The authors should provide CEA level in the laboratory section. -The authors stated that there was no palpable neck node, but many neck nodes were seen on USG. The authors should provide the node characteristics (size, border, echo), and they should state why LN metastases were suspected. -Please show the picture of the neck node + doppler USG. They are important. -The authors should provide the sequence of investigations. It wasn't very clear. Why do they perform colonoscopy? Did the authors send IHC staining that made them suspected colorectal cancer metastasis? -The authors stated that they performed resection of the neck node. They should note how many neck nodes and what operation they did (Modified radical neck dissection or excision)? -What modalities do the authors use for surveillance for neck nodes and shoulder mass? Overall, if the authors could provide the missing crucial information, I believe this manuscript could be quite an interesting case report.



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**Title:** Primary ascending colon cancer accompanying skip metastases in left shoulder skin and left neck lymph node: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05621530

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2022-01-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-10 20:16

Reviewer performed review: 2022-02-10 21:00

Review time: 1 Hour

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



Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

corrige cycle of chemotherapy specify the histology and stage of the TNM neoplasm, also describe how it was ascertained that the lymph node is a mts of colon (FNAC, FNAB?) WERE INVASION OF SMALL LYMPH-VASCULAR SPACES IN THE PRIMITIVE CANCER?



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**Title:** Primary ascending colon cancer accompanying skip metastases in left shoulder skin and left neck lymph node: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05755618

**Position:** Peer Reviewer

Academic degree: FACP, MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-01-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-10 06:00

Reviewer performed review: 2022-02-14 10:02

Review time: 4 Days and 4 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	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No



Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

In this case report, the authors described the metastasis of the left shoulder skin and left neck lymph node in a patient with ascending colon cancer. It is an interesting article. However, there are some concerns about this article. 1. There are no images of left neck lymph nodes and left shoulder skin. 2. An image of the color doppler ultrasound examination is absent. 3. In the introduction, the term "XELOX chemotherapy" is not preferred to use. It should be oxaliplatin and capecitabine chemotherapy. 4. The authors could present a table of laboratory data. 5. In the histopathological examination, the authors could present immunochemical staining. 6. There is no measure in the resected specimen nor the histopathological picture's microscope magnification value.7. The author stated that the patient's prognosis is good; however, it is unbelievable. Is the patient still alive? They could present the figure of the clinical course. 8. The number of references is small and not updated.9. The description of the case report is too concise.



# **RE-REVIEW REPORT OF REVISED MANUSCRIPT**

Name of journal: World Journal of Clinical Cases Manuscript NO: 74484 Title: Primary ascending colon cancer accompanying skip metastases in left shoulder skin and left neck lymph node: A case report Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed Peer-review model: Single blind **Reviewer's code:** 05755618 **Position:** Peer Reviewer Academic degree: FACP, MD Professional title: Doctor Reviewer's Country/Territory: Japan Author's Country/Territory: China Manuscript submission date: 2022-01-27 Reviewer chosen by: Jin-Lei Wang Reviewer accepted review: 2022-04-20 08:30 Reviewer performed review: 2022-04-21 01:53

Review time: 17 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	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous





statements

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

## SPECIFIC COMMENTS TO AUTHORS

The authors have responded to the reviewer's comments well. No further comments are available.