

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 75787

**Title:** Unilateral Lichen planus with Blaschko line distribution: a case report

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06195078

**Position:** Peer Reviewer

**Academic degree:**

**Professional title:**

**Reviewer's Country/Territory:** Reviewer\_Country

**Author's Country/Territory:** China

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-15 01:00

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**Review time:** 1 Day and 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

## SPECIFIC COMMENTS TO AUTHORS

The authors provide an interesting case and have been treated successfully, but there are also some issues that need to be improved. 1. Since the abbreviation was given in the article, the abbreviation should be used. 2. The language, grammar and spelling of the article need to be further improved. 3. Some language expressions are more vague, such as the size of soybeans, is the size of soybeans are same in each country? topical or oral hormones, what mean hormones? 4. Since the author proposes that the lesions are distributed along the Blaschko's line, it is necessary to provide pictures of the lesions on the trunk. 5. The legends of Figure 1 and Figure 2 are highly consistent and need to be merged into one image. 6. Figure 4 is a clinical picture rather than a dermoscopy. 7. The pathological description of Figure 5 is too simplistic. 8. The contents of Table 1 do not provide new information and this section should be deleted. 9. The authors did not provide a specific follow-up time. 10. The diagnosis of lichen planus along Blaschko's line was established by dermatoscopy and skin biopsy, whether there are specific histopathological and dermoscopic manifestations when lichen planus along Blaschko's line? 11. This sentence "Based on the above examination, the patient was diagnosed LP along Blaschko's line" in the part of TREATMENT should be deleted. 12. The title of the article should be changed to Unilateral Lichen planus with Blaschko line distribution: a case report.

1. We have used the abbreviations in the manuscript.
2. We have had our manuscript edited by Medjaden Inc.
3. We apologized for the confusion and have revised the vague language.
4. We have provided the pictures of the lesions on the trunk in the manuscript. Figure 1
5. We have revised the legends of Figure 1 and 2, and it is Figure 1 in the revised manuscript.
6. We have revised the title of Figure 4. It is Figure 2 in the revised manuscript.

7. According to the comments of the reviewer, we have added a detailed pathological description of Figure 5. It is Figure 4 in the revised manuscript.
8. We have deleted Table 1 in the manuscript.
9. We have provided a specific follow-up time in the revised manuscript.
10. Thank you very much for your comments. The histology of lichen planus along Blaschko's lines is identical to that of generalized lichen planus. Dermoscopy examination showed linear blood vessels and punctate blood vessels in the lesions. The vascular structure was radially arranged, and obvious white reticular stripes were seen. Histopathological examination showed reticular hyperkeratosis of the stratum corneum, wedge-shaped thickening of granular layer, irregular thickening of spinous layer, basal cell vacuolization and liquefaction, compact bandlike lymphocytic infiltration in superficial dermis, sporadic infiltration of chromatophilic cells, which shows typical features of lichen planus. The lesion distribution of lichen planus along Blaschko' lines is specific, when it is in a S-shape pattern on the abdomen and V-shape pattern on posterior midline, it is a linear distribution when it is on the extremities.
11. We have deleted the sentence "Based on the above examination, the patient was diagnosed LP along Blaschko's line" in the part of TREATMENT.
12. We have revised the title of the article to Unilateral Lichen planus with Blaschko line distribution: a case report.

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<b>Scientific quality</b>	<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
<b>Language quality</b>	<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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<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

## SPECIFIC COMMENTS TO AUTHORS

This article describes about the Unilateral distribution of Lichen planus along the Blaschko's line. And the patient's symptoms and treatment were well described in order. However there are some parts that need to be corrected and supplemented. 1. In the section of Core tip at line 56, authors described LP is rare disease, at line 65, authors described 'although cases of Lichen planus are not uncommon' while, at line 48, Authors described as 'although Lichen planus is a common skin disease..'. These contents should be consistent and need to be corrected. 2. At line 107, laboratory examination was not conducted. For the diagnosis, LP can be diagnosed without laboratory test? If then, further explanation may be needed. Further, for the differential diagnosis of other diseases, the laboratory test is not needed? 3. At line 152, Authors described about the differential diagnosis can be needed. And then authors need a description of how authors were able to differentiate between these diseases.

1. We apologize for the confusion and have revised the description. It should be lichen planus is a common skin disease, and lichen planus along the Blaschko's lines is rare.
2. The diagnosis of lichen planus is mainly based on the skin lesion and pathological examination, and the dermoscopy can provide objective proof for the diagnosis of atypical cases. In clinics, laboratory examination can help to rule out other diseases. The differential diagnosis of lichen planus from other diseases is made according to the specific pathological manifestations. The characteristics of lesion, history of disease, and patient's age all contribute to the differential diagnosis. When the pathological diagnosis is clear and the clinical manifestations are typical, laboratory test is not required.
3. Inflammatory linear verrucous epidermal Nevus(ILVEN) ILVEN mostly occurs below 5 years of age and generally over legs with intense pruritus. Lichen striatus



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predominantly occurs in children below 15 years. It is seen as asymptomatic linear papules arranged in form of band with slight scaling and hypopigmentation over proximal part of limbs with spontaneous resolution in 3 to 6 months.

Linear porokeratosis mostly occurs in infants, it can be type I lichen striatus or isotopic response triggered by trauma.

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<b>Scientific quality</b>	<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
<b>Language quality</b>	<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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<b>Peer-reviewer</b>	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

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

## SPECIFIC COMMENTS TO AUTHORS

The paper is all over a good one, with an important issue on dermatology. However, the language needs considerable improvements. Blaschko's line that you are writing throughout the paper, are instead Blaschko's lines (use plural !). The sequence of time description is really confusing: Four months ago, after hyperhidrosis, the patient showed a red polygonal flat pap-ule in the size of a soybean with pruritus at her right lower limb, for which she ap-plied topical desonide cream, but the symptoms did not relieve. One week later, the same lesion appeared on the right waist and was not treated. Three months ago, the symptoms were relieved and some lesions turned black. Two months ago..... Please avoid writing 'ago' and 'ago' several times, rather refer to a precise time or chronology. What do you mean by pruritus without conscious cause (?) is it visible cause / clear reason? Furthermore, images that you include do not mention Blaschko's lines anywhere in the legends; I do not see any connection between the same and the lesions. Can you clarify that?

1. We have revised the sequence of time description and have our manuscript edited by a professional editing company.
2. What do you mean by pruritus without conscious cause (?) is it visible cause / clear reason ?  
It should be without a clear reason.
3. Furthermore, images that you include do not mention Blaschko's lines anywhere in the legends; I do not see any connection between the same and the lesions. Can you clarify that?

We have clarified the description of images in the legend of Figure 1.