

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 76208

Title: Paraneoplasticneurological syndrome caused by cystitis glandularis: A casereport

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05688164

Position: Peer Reviewer

Academic degree: BSc, MD, PhD

Professional title: Research Fellow

Reviewer's Country/Territory: Hungary

Author's Country/Territory: China

Manuscript submission date: 2022-06-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-08 10:39

Reviewer performed review: 2022-07-10 09:03

Review time: 1 Day and 22 Hours

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 Grade E: Do not publish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 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

10 July 2022 Review report on the manuscript titled 'Paraneoplastic Neurological Syndrome Caused by Cystitis Glandularis: A Case Report and Literature Review', by Zhao D & Li Q, submitted to World Journal of Clinical Cases Manuscript ID: 76208

Dear Authors, In this case study entitled 'Paraneoplastic Neurological Syndrome Caused by Cystitis Glandularis: A Case Report and Literature Review', Zhao & Li Q reported a case that cystitis glandularis caused paraneoplastic neurological syndrome characterized initially by cognitive impairment and later by dementia, and vomiting, among other; MRI showed diffuse white matter lesions; and the resection of cystitis glandularis led to remission. The main strength of this manuscript is that it addresses an interesting and timely case report, presenting that cognitive impairment and diffuse white lesions were caused by cystitis glandularis and they were reversed after the surgical intervention. In general, I think the idea of this article is really interesting and the authors' fascinating observations on this timely topic may be of interest to the readers of World Journal of Clinical Cases. However, some comments, as well as some crucial evidence that should be included to support the authors' argumentation, needed to be addressed to improve the quality of the manuscript, its adequacy, and its readability prior to the publication in the present form, in particular reshaping parts of the 'Introduction' and 'Discussion' sections by adding more evidence. Please consider the following comments: 1. ORCID number: Please present the ORCID numbers of the authors. 2. Abstract: According to the Journal's guidelines (<https://www.wjgnet.com/bpg/GerInfo/187>), please present the background, the case summary, and the conclusion with no less than 250 words. 3. Keywords: Please present six keywords. 4. Core tip: Please present the core tip. 5. In general, I recommend

presenting the main text with sections including the introduction, the case presentation, the discussion, the conclusion, and the references according to the Journal's guidelines. The case presentation is further divided into subsections. I also recommend using tables in the case presentation. Furthermore, the authors are advised to use more evidence to back their claims, especially in the Introduction of the article, which I believe is currently lacking. Thus, I recommend the authors to attempt to deepen the subject of their manuscript, as the bibliography is too concise: nonetheless, in my opinion, less than 50/60 articles for a research paper are really insufficient. Therefore, I suggest the authors to focus their efforts on researching more relevant literature: I believe that adding more studies and reviews will help them to provide better and more accurate background to this case report.

6. Introduction: The authors are expected to present the introduction with enough information on paraneoplastic syndrome, cystitis glandularis, and cognitive impairment, leading to the main topic of this case reports. For this purpose, I suggest presenting this section by carefully describing the following points: cognitive impairment in paraneoplastic syndrome, cystitis glandularis is not a neoplastic disease, so probably presenting preneoplastic, and the most importantly rationalizing three components: cognitive impairment, paraneoplastic syndrome, and cystitis grandularis.

7. In this regard, I believe that it could be useful to focus on the role that the prefrontal cortex and hippocampus networks have in cognitive dysfunction: evidence from a novel manuscript offers an overview of the anatomical-functional interplay between the prefrontal cortex and heart-related dynamics in human emotional conditioning (learning) and proposes a theoretical model to conceptualize these psychophysiological processes, the neurovisceral integration model of fear (NVI-f) that can be impaired in cognitive impairment (<https://doi.org/10.1016/j.tins.2022.04.003>) and a recent study which demonstrated, on a neurophysiological level, the role of PFC in fear conditioning (<https://doi.org/10.1111/psyp.14122>). In line with the previous suggested reference, I

believe that it may be useful adding some evidence that focused on pathophysiological and cognitive models of PTSD. In this regard, to provide a more coherent and defined background on this topic, I would suggest focusing on neural and chemical mechanisms underlying psychiatric disorders, for example examining the involvement of neurogenic inflammation and neuropeptides in the pathophysiology of psychiatric and neurological presentations (<https://doi.org/10.3390/biomedicines10010076>; <https://doi.org/10.3390/biomedicines9050517>). I firmly believe that adding this information will help in providing insights on the role of dysfunctional brain activity in mental disorders. 8. The Case Presentation: I recommend using some tables to provide clinical information on the case. This would definitely help a reader to grasp the clinical picture of the patient and thus, recognized the importance of this reports. 9. Discussion: I suggest rewriting this section more accurately. To properly present findings, I think that authors should provide more details about imp 10. Discussion: The discussion of data citation was good and captured the state of the art well, but I would have liked to see some views on a way forward: for example, I would have liked some further discussion on the requirement of non-pharmacotherapies to treat insomnia related to psychiatric disorders. Notably, non-invasive brain stimulation (NIBS) techniques have been widely used as a new type of treatment for mental disorders, as they notably alleviate mood symptoms: in this regard, I would suggest adding evidence of the beneficial effects of NIBS in treatment of mental disorders in these patients. In this regard, I would suggest citing a recent review (<https://doi.org/10.1016/j.neubiorev.2021.04.036>) that described the potential and effectiveness of non-invasive brain simulation (NIBS) to interfere and modulate the abnormal activity of neural circuits (i.e., amygdala-mPFC-hippocampus) involved in the acquisition and consolidation of fear memories. Similarly, another recent study illustrated the therapeutic potential of NIBS as a valid alternative in the treatment of

abnormally persistent fear memories that characterized those patients with anxiety disorders that do not respond to psychotherapy and/or drug treatments (<https://doi.org/10.1016/j.jad.2021.02.076>). These findings highlight how NIBS and are a valuable tool in research that might have potential diagnostic and therapeutic applications to investigate treatment duration for psychiatric symptoms of PTSD. 11. Discussion: In line with the previously suggested literature, I would finally recommend a recent study that has focused on cognitive symptoms (i.e., dysfunction in attention and emotion perception) in psychiatric and brain-damaged patients, and highlighted the role that specific dysfunctional brain regions, such as amygdala and superior temporal sulcus (STS), have on recognition and expression of non-verbal communicative signals of emotion in PTSD (<https://doi.org/10.3390/biomedicines10030627>). 12. I think the 'Conclusions' paragraph would benefit from some thoughtful as well as in-depth considerations by the authors, because as it stands, it is very descriptive but not enough theoretical as a discussion should be. The authors should make an effort, trying to explain the theoretical implication as well as the translational application of their research. Overall, the manuscript contains two figures, no table, and nine references. I believe that this manuscript might carry important value presenting a case report of cognitive impairment in patients with cystitis grandularis. I hope that, after these careful revisions, the manuscript can meet the Journal's high standards for publication. I am available for a new round of revision of this article. I declare no conflict of interest regarding this manuscript. Best regards, Reviewer

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Peer-review model: Single blind

Reviewer's code: 02623966

Position: Editorial Board

Academic degree: MD, MSc, PhD

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Reviewer's Country/Territory: Greece

Author's Country/Territory: China

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Review time: 1 Hour

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



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statements

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

SPECIFIC COMMENTS TO AUTHORS

It is an interesting manuscript. Authors succeed to present their data in a clear way adding information to the existing literature. Therefore, I have no corrections to do and the manuscript can be published unaltered.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Position: Peer Reviewer

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Professional title: Research Fellow

Reviewer's Country/Territory: Hungary

Author's Country/Territory: China

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

SPECIFIC COMMENTS TO AUTHORS

15 August 2022 The 2nd review report on the manuscript titled 'Paraneoplastic Neurological Syndrome Caused by Cystitis Glandularis: A Case Report and Literature Review', by Zhao D & Li Q, submitted to World Journal of Clinical Cases Manuscript ID: 76208 Dear Authors, I am pleased to see that the authors did an excellent work clarifying most of the comments I have raised in the previous round of the review session. Currently, this paper is a well-written, timely piece of research and presenting that cognitive impairment and diffuse white lesions were caused by cystitis glandularis and they were reversed after the surgical intervention. That said, I just suggest some minor points below, I believe, for the betterment of this manuscript to finalize my review session. Comments: 1. Abstract, Conclusion: I recommend that the authors expand the conclusion with three sentences. 2. Keywords: I suggest using as many keywords as possible in the first two sentences of the abstract. This makes this article more visible to readers. 3. It deserves briefly to add more information on the roles of diet in relation with inflammation in mental health, endogenous metabolic factors in cognitive and emotional functions, and pathological neural substrates of cognitive impairment, especially on frontal lobe dysfunction (<https://advances.umw.edu.pl/en/ahead-of-print/152350/>; <https://doi.org/10.3390/biomedicines10040849>; <https://doi.org/10.1016/j.tins.2022.04.003>). Overall, the manuscript contains two figures, one table, and 37 references. This is a timely and needed work, thus I believe that manuscript now meets the Journal's standards for publication. I am always available for other reviews of such interesting and important articles. I look forward to seeing further study on this issue by these authors in the future. I declare no conflict of interest regarding this manuscript. Best regards, Reviewer