

## PEER-REVIEW REPORT

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

**Manuscript NO:** 77454

**Title:** Microwave ablation of solitary T1N0M0 papillary thyroid carcinoma: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 03656595

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Chief Doctor, Professor

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

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

**Manuscript submission date:** 2023-03-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-03-15 15:15

**Reviewer performed review:** 2023-03-23 19:53

**Review time:** 8 Days and 4 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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

This article investigated a case with papillary thyroid carcinoma treated by microwave ablation. Major points: 1. The background in the manuscript is too brief to understand the motivation of the study. Previously, microwave ablation was mainly used for the treatment of recurrent thyroid cancer without surgical indications. Nonetheless, the current indications were extended to the ablation of benign thyroid nodules, thyroid microcarcinoma, regional metastatic lymph nodes, as well as enlarged glands in Graves' disease. The authors need to replenish the treatment indications about the Korean Society of Thyroid Radiology launched a consensus on the ablation treatment (AT) of thyroid nodules in 2012 and 2017. 2. Similarly, the discussion in the manuscript is too brief, and lack of main concerns. e.g., ①For lesions > 1 cm in diameter, the residual rate of the tumor is as high as 50% after AT. How did you confirm there was no tumor residue? ② Ablation will increase the risk of subsidiary-injury. How did you avoid it? ③ What are the best option for the ablation therapy?

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**Reviewer's code:** 05462969

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Assistant Professor, Attending Doctor

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

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

**Manuscript submission date:** 2023-03-14

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-04-09 00:32

**Reviewer performed review:** 2023-04-17 14:46

**Review time:** 8 Days and 14 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
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<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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

This case shows microwave thermoablation can be a safe and effective alternative to surgery in patients with no conditions to undergo surgery or refuse it. However, there is no control case, so this is not solid evidence for clinical practice.