

## PEER-REVIEW REPORT

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

**Manuscript NO:** 78314

**Title:** Blue Rubber Bleb Nevus Syndrome Complicated with Disseminated Intravascular Coagulation and Intestinal Obstruction: A Case Report and Literature Review

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

**Peer-review model:** Single blind

**Reviewer's code:** 06264434

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-06-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-06-24 06:32

**Reviewer performed review:** 2022-07-02 06:47

**Review time:** 8 Days

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 Grade E: Do not publish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
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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



**Baishideng  
Publishing  
Group**

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  
statements**

Peer-Review: ☒ Anonymous ☐ Onymous

Conflicts-of-Interest: ☐ Yes ☒ No

### **SPECIFIC COMMENTS TO AUTHORS**

Thank you for the opportunity to review the paper. There are three points that concerned me after reading the paper. First, what criteria did they use to diagnose DIC? Secondly, it is possible that the hemangioma may have caused chronic DIC before the bleeding, but after hemostasis was achieved, was the DIC able to be weaned off? And finally, what about the following part? After admission, the patient was treated with symptomatic support such as plasma, fibrinogen, vitamin K, aminocyclic acid, and tranexamic acid for antifibrinolytics, octreotide, proton pump inhibitor, thrombin, and blood transfusion, the platelets and fibrinogen gradually recovered to their normal ranges. It says that the drugs were included as antifibrinolytics, but they are not antifibrinolytics except for tranexamic acid. Furthermore, giving tranexamic acid alone without anticoagulation for hyperfibrinolytic DIC may increase the risk of death and is treated as a near contraindication. I think the paper is required to describe why this choice was made.

## PEER-REVIEW REPORT

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

**Manuscript NO:** 78314

**Title:** Blue Rubber Bleb Nevus Syndrome Complicated with Disseminated Intravascular Coagulation and Intestinal Obstruction: A Case Report and Literature Review

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

**Peer-review model:** Single blind

**Reviewer's code:** 03468910

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Assistant Professor, Surgeon

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

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

**Manuscript submission date:** 2022-06-24

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-08-04 14:29

**Reviewer performed review:** 2022-08-06 15:36

**Review time:** 2 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 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>Peer-reviewer statements</b>	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

The topic of this manuscript falls into the scope of World Journal of Clinical Cases. The Authors report a case of Blue rubber bleb nevus syndrome (BRBNS) combined with disseminated intravascular coagulation (DIC) treated with argon Plasma Coagulation under enteroscopy and Sirolimus, based on anti-fibrinolysis and blood transfusion. Blue rubber bleb nevus syndrome (BRBNS) is a rare vascular malformation syndrome with unclear etiopathogenesis and non-curative treatment. Blue rubber bleb nevus syndrome (BRBNS) is characterized by multiple vascular malformations of the skin, gastrointestinal tract and other viscerla organs. The most common symptoms are intermittent gastrointestinal bleeding. The diagnosis is based on the presence of characteristic cutaneous lesions with or without gatsrointestinal bleeding. The treatment is largely symptomatic. This manuscript is very interesting and provides a contribution in the therapy of Blue rubber bleb nevus syndrome (BRBNS). Introduction and Case report are good. Discussion and Conclusions sound well. Complete the refences, good Figures.