

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Dermatology*

**Manuscript NO:** 80847

**Title:** Generalized prurigo nodularis with dramatic response to dupilumab treatment: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 03967085

**Position:** Editorial Board

**Academic degree:** MD, PhD

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

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

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

**Manuscript submission date:** 2022-10-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-10-16 23:28

**Reviewer performed review:** 2022-10-26 14:26

**Review time:** 9 Days and 14 Hours

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 Grade E: Do not publish
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important novelty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important creativity or innovation?

	<input type="checkbox"/> [J31] Yes <input type="checkbox"/> [J30] No Does this manuscript use reliable research methods? <input type="checkbox"/> [J41] Yes <input type="checkbox"/> [J40] No Are the manuscript-accompanying data and figures authentic? <input type="checkbox"/> [J51] Yes <input type="checkbox"/> [J50] No Does this manuscript make scientifically significant conclusions? <input type="checkbox"/> [J61] Yes <input type="checkbox"/> [J60] No
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> [Y] 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"/> [Y] Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> [Y] Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> [Y] Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The title is informative and relevant. The references are relevant and recent. The cited sources are referenced correctly. Appropriate and key studies are included. The introduction reveals what is already known about this topic. The research question is clearly outlined. The case is well-described, the used methods methods for diagnosing and therapy are valid and reliable. The patient data is presented in an appropriate way. The illustrative materials are relevant and clearly presented. Data is discussed from different angles and placed into context without being overinterpreted. The conclusions are supported by references and own results. This paper added to what is already in the topic. The article is consistent within itself. Specific comments on weaknesses of the article and what could be improved: Major points - none Minor points 1. Add units when reporting test results (i.e., IgE levels, etc.) 2. Add more information about the

immunological background of the disease before introducing the biologic treatment 3.  
Add a paragraph discussing the prognosis and follow-up of the patient and  
recommendations based on the case report

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**Reviewer's code:** 00005290

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-10-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-10-27 15:29

**Reviewer performed review:** 2022-10-31 16:28

**Review time:** 4 Days

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
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<b>Re-review</b>	<input checked="" type="checkbox"/> [Y] Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> [Y] Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> [Y] No

## SPECIFIC COMMENTS TO AUTHORS

Authors report on a case of generalized prurigo nodularis who showed a dramatic response to dupilumab treatment. The case report is interesting, but some points need to be addressed by Authors in a revised   In Discussion Authors should mention the key involvement of the cytokine interleukin-31 (IL-31) in the symptomatology of pruritus, and both IL-31 and its receptor have become potential therapeutic targets for a range of pruritic diseases, including prurigo nodularis. Iron deficiency is a commonly regarded cause of this symptom. Authors should provide information about the anemia of their patient (i.e. mean corpuscular volume, iron and total iron binding capacity. In some cases, iron replacement leads to complete cessation of pruritus very shortly after commencement of therapy, thus resolving what may otherwise be a debilitating and frustrating condition. (Millington   GWM et al.   British Association of Dermatologists'



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guidelines for the investigation and management of generalized pruritus in adults without an underlying dermatosis, 2018. Br J Dermatol 2018;178:34–60).