



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 82315

Title: Spontaneous Conus Infarction with "Snake-Eye Appearance" on Magnetic Resonance Imaging: A Case report and Literature Review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06395944

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-12-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-19 11:45

Reviewer performed review: 2022-12-26 09:49

Review time: 6 Days and 22 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 Grade E: Do not publish
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



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Peer-reviewer statements	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

It is interesting that the manuscript entitled " Spontaneous Conus Infarction with "Snake-Eye Appearance" on Magnetic Resonance Imaging: A Case report and Literature Review" reported a case of spontaneous conus infarction with acute lower extremity pain and dysuria as the first symptoms, in which magnetic resonance imaging revealed a rare "snake-eye appearance". The paper is well structured, written English is generally good throughout the text. I find the article potentially acceptable for publication after major revision, my comments are below: 1. Novelty: The contributions that the study has made for research progress in this field should be highlighted. 2. Discussion: 2.1 Since the "snake-eye appearance" is not specific to spinal cord MRI, please discuss the differential diagnosis between spontaneous conus infarction and hirayama disease, spinal muscular atrophy syndrome, cervical spondylotic myelopathy and upper limb monomeric muscular atrophy on MRI and other clinical features. And summarize them on a table. 2.2 Please discussed the CTA features of spontaneous conus infarction. 2.3 Please also discussed the results of cerebrospinal fluid examination of spontaneous conus infarction. 2.4 Limitation and future scope are missing. 3. Figure: 3.1 Please provide the figures of CTA examinations. 3.2 Please provide the figures of MRI examinations during follow up if possible. 3.3 The arrows should be more striking. 4. References: It is better to cite the literature published in recent years, some references are too old.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05291028

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

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Reviewer accepted review: 2023-01-03 07:39

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Review time: 4 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
Novelty of this manuscript	<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 novelty
Creativity or innovation of this manuscript	<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 creativity or innovation



Scientific significance of the conclusion in this manuscript	<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
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
Peer-reviewer statements	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

The authors present a clinical note reporting the case of a 71-year-old man with isolated conus medullary syndrome secondary to acute infarction and providing a literature review on this topic. The study is potentially interesting, but the manuscript can be improved according to the following suggestions: 1.In the Abstract, please, include demographic data and increase the description of the clinical data of the patient described. 2.In the Abstract (Conclusion) and in the Discussion, please add “syndrome” to “acute onset of conus medullaris”. 3.Please change “positive Babinski sign” to “presence of Babinski’s sign” in the text. 4.In the Discussion section, it would be interesting to include a comment on the fact that spontaneous dorsal spinal cord infarction is a rare event and represents, for example, <0.4% of ischemic strokes in a large stroke data bank (Cerebrovasc Dis 2008; 26: 509-516)