

## PEER-REVIEW REPORT

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

**Manuscript NO:** 85258

**Title:** Primary Adrenal Ewing Sarcoma: A Systematic Review of the Literature

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

**Peer-review model:** Single blind

**Reviewer's code:** 00066723

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-04-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-04-27 11:40

**Reviewer performed review:** 2023-05-04 10:39

**Review time:** 6 Days and 22 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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade A: Excellent <input 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

<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 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
<b>Conclusion</b>	<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
<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 systematic review reads well and summarizes information on clinicopathological data of a very rare disease Ewing sarcoma localized to the adrenal gland. The study emphasizes how little we know of these rare tumors and which severely hampers effective treatment. Comments: 1. Page 2, introduction, line 10 – Please mention some EWSR1-FLI1 target genes by name especially the ones involved in tumorigenesis. 2. Figure 1 – Clearly list eligibility criteria in the materials and methods section for the assessment of full text articles. 3. Page 5, results, line 2 – Here it says fifty-six studies were included whereas Figure 1 indicates n=55. Please check and correct. 4. Are primary adrenal Ewing sarcoma molecularly distinct from bone localized Ewing sarcomas? 5. Please briefly give some future prospects. What burning questions should be answered regarding this particular tumor? How should the field progress to improve management and treatment of these rare tumors?

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**Reviewer's code:** 02979917

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-04-20

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

**Reviewer accepted review:** 2023-05-31 01:43

**Reviewer performed review:** 2023-06-06 09:59

**Review time:** 6 Days and 8 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input checked="" type="checkbox"/> Grade D: No novelty
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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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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The authors reviewed the literature on primary adrenal ES/PNET over the past 30 years. And they further updated the diagnosis, treatment, and oncological outcomes of primary adrenal ES/PNET. While the clinical topic in the focus of this manuscript is certainly interesting, there are some issues to complete. And major revisions are needed.

1. It should be clearly identified in the title and manuscript that it is a systematic review of case reports and case series.
2. The detailed search strategy for each database should be listed in the supplementary table.
3. The PRISMA guidelines for reporting in systematic reviews are suggested to be used during the selection and data analysis phases. The format of the flow chart (Figure 1) should comply with the PRISMA flow chart.
4. The authors should cite the included references in the results.
5. The regional distribution of reported cases could be shown in a graph to be more intuitive.
6. The authors should record the overall number of patients in Table 1 and Table 2. The percentage of patients partly seems to be incorrect. And the style of Table 1 and Table 2 should also be adjusted.
7. The introduction mentioned the recent advances in molecular biology. However, the discussion did not mention how molecular biology can



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guide novel therapeutic protocols. And also, how conventional therapeutic protocols, including radiotherapy, can be improved by novel techniques. Authors can refer to the articles below: Artificial intelligence in radiotherapy. Seminars in cancer biology, 86(Pt 2), 160–171. <https://doi.org/10.1016/j.semcancer.2022.08.005> SPOP and OTUD7A Control EWS-FLI1 Protein Stability to Govern Ewing Sarcoma Growth. Advanced science (Weinheim, Baden-Wurttemberg, Germany), 8(14), e2004846. <https://doi.org/10.1002/advs.202004846> Multimodal analysis of cell-free DNA whole-genome sequencing for pediatric cancers with low mutational burden. Nature communications, 12(1), 3230. <https://doi.org/10.1038/s41467-021-23445-w> 8. There are some English mistakes. The English should be polished by native speakers or language experts.