

## PEER-REVIEW REPORT

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

**Manuscript NO:** 85589

**Title:** Non-retroareolar male mucinous breast cancer without gynecomastia development in an elderly man: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 04419139

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor, Senior Scientist

**Reviewer's Country/Territory:** United States

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

**Manuscript submission date:** 2023-05-05

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

**Reviewer accepted review:** 2023-05-22 02:05

**Reviewer performed review:** 2023-05-23 03:08

**Review time:** 1 Day and 1 Hour

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 Grade E: Do not publish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 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<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

Firstly, I would like to commend your comprehensive and detailed report of a case of male mucinous breast carcinoma. The original findings of this manuscript are the case report of male mucinous breast carcinoma, which is extremely rare. You proposed an interesting hypothesis that male mucinous breast carcinoma may be overlooked as lesions might not be located within the areolar region. In this case, you verified this hypothesis through surgical and pathological analysis. Secondly, the quality and importance of this manuscript lie in providing valuable clinical data and insights on male mucinous breast carcinoma, proposing new diagnostic and therapeutic perspectives. Your discussion on the therapeutic strategies in the manuscript provides valuable insights, especially for patients primarily treated with hormonal therapy after 2010. However, I would suggest a clearer summarization of these data and viewpoints in the conclusion section. However, the limitations of this study lie in the small number of cases, making it difficult to draw widely applicable conclusions. Also, while you have mentioned many potential risk factors that might affect the development of male mucinous breast carcinoma, there is a lack of detailed information on how these risk



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
<https://www.wjgnet.com>

factors interact. For future directions of the topic described in this manuscript, I suggest further research into the interplay of these risk factors, and why the incidence of male mucinous breast carcinoma is so low. Furthermore, I would like you to discuss further why mucinous tumors are likely to be overlooked and how this can be improved. For the next steps for the authors, I would suggest studying more cases of male mucinous breast carcinoma to better understand the pathogenesis and optimal treatment of this rare disease. In summary, I perceive this as a high-quality and important manuscript that provides new insights and information on the clinical diagnosis and treatment of male breast cancer. Despite some limitations, I believe that this manuscript will have a positive impact on basic science and clinical practice.

## PEER-REVIEW REPORT

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

**Manuscript NO:** 85589

**Title:** Non-retroareolar male mucinous breast cancer without gynecomastia development in an elderly man: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 05209772

**Position:** Peer Reviewer

**Academic degree:** N/A

**Professional title:** N/A

**Reviewer's Country/Territory:** South Korea

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

**Manuscript submission date:** 2023-05-05

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

**Reviewer accepted review:** 2023-05-25 08:05

**Reviewer performed review:** 2023-06-08 06:17

**Review time:** 13 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
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

<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 authors present male mucinous breast cancer without gynecomastia. The authors should have confirmed that this article is not the first report about male mucinous breast cancer, non-retro areolar position and without gynecomastia. However, the report about non-retro areolar lesion is scanty. Several reports are published about this malignancy. In the discussion, the authors should concise the contents. The authors couldn't describe all of the papers in the references. What are the different points depending on the site and gynecomastia?