

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 86439

Title: Primary cutaneous anaplastic large cell lymphoma with over-expressed Ki-67

transitioning into systemic anaplastic large cell lymphoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04729411 Position: Peer Reviewer Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2023-06-19

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-28 14:20

Reviewer performed review: 2023-07-28 14:36

Review time: 1 Hour

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear Author, thank you for sharing your experience with us. Good luck.



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Reviewer's code: 05196024 Position: Editorial Board Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2023-06-19

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-08-07 19:45

Reviewer performed review: 2023-08-10 03:35

Review time: 2 Days and 7 Hours

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
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Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript describes a case of PC-ALCL which recurred and eventually transformed into systemic ALCL. This is the second reported case of such a transformation, and the authors performed some investigation as to the reason for the transformation. This is an interesting case, but the manuscript requires some revision before acceptance. Specific comments: First - none of the figures are mentioned in the text! This requires correction. Four figures are far too many for such a brief report. Recommend combining to make one figure out of current Figure 1A, B and F; Figure 2 2A, B, and F; Figure 3A (can say ALK and IRF4 staining second relapse was similar to previous relapse); and Figure 4A and E. Page 4, line 4: Recommend deleting "and CT scan" as this is a histologic diagnosis. Page 5, line 1: What do the authors mean by "medium texture"? This is unclear. Page 5, line 11: Please provide the upper limit of normal for LDH at your institution. Page 6, line 2: Do the authors mean BEAM preparative regimen (progenitor is not the correct term)? Page 6, lines 4 and 5: Recommend revising the text to something like "neutrophil engraftment occurred on Day +11 and platelet engraftment occurred on Day +14". Page 6, lines 10-12: It is not



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

Telephone: +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com

https://www.wjgnet.com

clear whether the authors mean that the patient had been in remission for 12 months with the last follow up in November 2021, or if the patient relapsed after 12 months. The second half of the sentence is likewise unclear; does this mean that the literature reports that most patients relapse by 12 months? Page 7, top paragraph: The authors state in some places that they examined DUSP22 expression, and in others IRF4 rearrangement. The authors should clarify what was examined. The authors should change C-ALCL to PC-ALCL in this paragraph to be consistent with the rest of the manuscript. The last sentence in this paragraph should be revised; ALCL has been extensively studied and, as the authors note with reference 11, DUSP22-IRF4 rearrangements have been found to confer a favorable prognosis in ALK-negative ALCL. See also Parilla Castellar ER et al., Blood 2014, Pedersen MB et al., Blood 2017, and multiple other publications. The favorable prognosis of DUSP22-IRF4 rearrangement should be discussed in more details with additional references added. Question: Since this patient's ALCL was strongly CD30 positive, was treatment with brentuximab considered, especially in light of the treatment of the similar Bulgarian patient? This is a question readers will have, and should be discussed in the manuscript.



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Reviewer's code: 05429012 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Research Scientist

Reviewer's Country/Territory: Jordan

Author's Country/Territory: China

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Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-08-04 02:50

Reviewer performed review: 2023-08-11 04:04

Review time: 7 Days and 1 Hour

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
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Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Although authors have prepared interesting manuscript describing a rare pathological case of PC-ALCL, the following points have to be addressed: - The authors did not mention if they conducted immunohistochemical studies on B-cell lines including CD20 as an example to show on histopathological level the case presented is T cell lymphoma. - No control slides were shown either for staining purposes or disease purposes. - figures are not well prepared and arrows should be integrated with figures. - figures are not well inegrated in the text. - language needs better editing