



## PEER-REVIEW REPORT

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

**Manuscript NO:** 76018

**Title:** Tumor-to-tumor metastasis of clear cell renal cell carcinoma to contralateral synchronous pheochromocytoma: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 05459416

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Medical Assistant, Research Assistant Professor, Research Associate

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

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

**Manuscript submission date:** 2022-02-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-03-14 21:14

**Reviewer performed review:** 2022-03-14 21:48

**Review time:** 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<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
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### **SPECIFIC COMMENTS TO AUTHORS**

Abstract section: Background: Please describe the definition of the abbreviations "RCC" and "PCC", since it is mentioned for the first time in the text. Case presentation: Please clarify the term "aggravating abdominal pain" and if it is the correct term, specify which stimulus "aggravates" the abdominal pain and the characteristics of abdominal pain. Please specify the type of computed tomography (CT), contrast-enhanced CT scan? adrenal protocol? Was the diagnosis of pheochromocytoma made in the postoperative period? Please describe the medication that the patient was receiving before surgery. Did the patient receive alpha-blocker therapy prior to surgery to prevent complications associated with pheochromocytoma? I am surprised/concerned that having found a left adrenal incidentaloma, the medical team did not request measurement of plasma/urinary metanephrines prior to surgery. Discussion: Very succinct. It seems only like an article review, and does not discuss the clinical case presented.



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**Reviewer's code:** 02505244

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-02-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-03-14 19:38

**Reviewer performed review:** 2022-03-17 11:00

**Review time:** 2 Days and 15 Hours

<b>Scientific quality</b>	<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
<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



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### **SPECIFIC COMMENTS TO AUTHORS**

Very interesting case report, well presented. Major Comment: The authors should underline in the discussion with an additional sub-paragraph the fundamental role of diagnostic imaging in such peculiar clinical cases to stage as well as to characterize tumor lesions. In particular, the role of total-body PET/CT with FDG should be underlined in patients with multiple tumor sites. as occurred for example in patients described by Klain et al. (Klain M, Maurea S, Gaudieri V, Zampella E, Volpe F, Manganelli M, Piscopo L, De Risi M, Cuocolo A. The diagnostic role of total-body 18F-FDG PET/CT in patients with multiple tumors: a report of the association of thyroid cancer with lung or renal tumors. *Quant Imaging Med Surg.* 2021 Sep;11(9):4211-4215. doi: 10.21037/qims-21-36. PMID: 34476200; PMCID: PMC8339643). Furthermore, the innovative role of radiomics to characterize CCRCC should mentioned according to experience by Stanzione et al. (Stanzione A, Ricciardi C, Cuocolo R, Romeo V, Petrone J, Sarnataro M, Mainenti PP, Improta G, De Rosa F, Insabato L, Brunetti A, Maurea S. MRI Radiomics for the Prediction of Fuhrman Grade in Clear Cell Renal Cell Carcinoma: a Machine Learning Exploratory Study. *J Digit Imaging.* 2020 Aug;33(4):879-887. doi: 10.1007/s10278-020-00336-y. PMID: 32314070; PMCID: PMC7522138). Finally, the role of specific radiopharmaceuticals to characterize PCC, such as labeled MIBG and/or somatostatin analogs, should be also discussed, as reported by Lastoria et al. (Lastoria S, Maurea S, Vergara E, Acampa W, Varrella P, Klain M, Muto P, Bernardy JD, Salvatore M. Comparison of labeled MIBG and somatostatin analogs in imaging neuroendocrine tumors. *Q J Nucl Med.* 1995 Dec;39(4 Suppl 1):145-9. PMID: 9002775) and by Maurea et al. (Maurea S, Caracò C, Klain M, Mainolfi C, Salvatore M. Imaging characterization of



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non-hypersecreting adrenal masses. Comparison between MR and radionuclide techniques. *Q J Nucl Med Mol Imaging*. 2004 Sep;48(3):188-97. PMID: 15499292). Minor comments: 1. The abbreviation PCC needs to be initially expanded.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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

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**Reviewer's code:** 02505244

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-02-28

**Reviewer chosen by:** Li-Li Wang

**Reviewer accepted review:** 2022-04-20 09:54

**Reviewer performed review:** 2022-04-20 10:20

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<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 checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

#### **SPECIFIC COMMENTS TO AUTHORS**

The authors have addressed satisfactorily the comments and thus the paper is acceptable for publication.