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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 87696

Title: Multiple therapies relieve long-term tardive dyskinesia in a patient with chronic

schizophrenia: a case report.

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03029582 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Consultant Physician-Scientist, Doctor, Physiotherapist

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2023-08-23

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-09-23 20:03

Reviewer performed review: 2023-09-24 09:14

Review time: 13 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	[] Grade D: Fair [] Grade E: Do not publish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 [] Grade B: Good [Y] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No creativity or innovation
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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No scientific significance
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] 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

This is an interesting case of a patient with schizophrenia ant TD after using SGA. The case is very familiar to psychiatrist, however it is of interest because: TD was caused by medium dose of risperidone, it was refractory, authors introduced many therapies (older and newer) in order to come to a beneficial outcome. So, it is informative for the reader that may confront the challenge of treating TD. There are some remarks to be addressed: 1. Abbreviations should be at first explained (DRBA, dopamine receptor blocking agents, second paragraph) 2. Was it a case of late-onset schizophrenia? Or the diagnosis was dramatically delayed? If it is late-onset, then it is interesting to focus on this special population and the authors could provide details and maybe hypothesis about TD in late onset schizophrenia 3.It should be stressed that only 4 mg of risperidone for 6 months were adequate for causing severe symptomatology 4. Why was she initiated with ROS? Did she have problem swallowing in the first place or it was a result of TD followed by worn tongue?