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ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 2820

Title: A case of mucosa-associated lymphoid tissue lymphoma of the gastrointestinal tract showing extensive plasma cell differentiation with prominent Russell bodies

Reviewer code: 01221903

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-03-19 10:18

Date reviewed: 2013-03-25 23:00

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

See attachment



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ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 2820

Title: A case of mucosa-associated lymphoid tissue lymphoma of the gastrointestinal tract showing extensive plasma cell differentiation with prominent Russell bodies

Reviewer code: 00723142

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-03-19 10:18

Date reviewed: 2013-03-27 00:01

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

It is a very rare combination or concurrent development. There are cases reported before interestingly from Japan. 1. Annals Hematol 2001 2. Int J hematol 2001: 73, 230-235 There is a strong debate about differential diagnosis, diagnosis, clinical behaviour and management issues. It is interesting to note as it is more prevalent in japan or only is a coincidence that all cases are reported from japan. how the patients were managed clinically? Are there any specific genetic tests to facilitate the diagnosis?



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ESPS Manuscript NO: 2820

Title: A case of mucosa-associated lymphoid tissue lymphoma of the gastrointestinal tract showing extensive plasma cell differentiation with prominent Russell bodies

Reviewer code: 00034993

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-03-19 10:18

Date reviewed: 2013-03-27 20:09

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

General: Authors reported a case of MALT lymphoma with extensive plasma cell differentiation in the ileum and T-prolymphocytic leukemia. As authors suggested, although this case is rare, diagnosis of MALT lymphoma may remain unclear. Moreover, this version has any problems. Therefore, authors should revise to increase the scientific value according to reviewer's comments and suggestions. Major comments: 1. Most important point of this case reports is unclear whether this case is MALT lymphoma or not. Differential diagnoses were not enough. Authors summarize more detail. 2. How about association with MALT lymphoma and T-PLL? By chance or interaction? 3. Atypical erosion doesn't reveal endoscopic findings in this case. Authors should use appropriate endoscopic technical term. 4. Most MALT lymphoma is positive for CD20, but not in this case. 5. Please add endoscopic findings of chromoendoscopy and narrow band imaging. 6. MALT lymphoma often has multiple lesions. Therefore, in general, physicians check other lesions in small bowel by capsule endoscopy, CT scanning or small bowel series. 7. 20% of gastric MALT lymphoma has the API2-MALT1 fusion gene. Authors should check. Also, t(1;14)(p22;q23). 8. This case was admitted to hospital for detailed examination after she presented with nausea, diarrhea and loss of appetite. However, reviewer believes that these symptoms have no relationship with MALT lymphoma. 9. In this study, H. pylori infection checked by pathological evaluation. However, this case had chronic gastritis with mucosal atrophy, suggested that H. pylori infected into gastric mucosa. Therefore, further evaluation will be required. 10. One of major characteristics of MALT lymphoma is the LEL (Lymphoepithelial lesion). Minor comments: 1. Please add endoscopic picture of rectum. 2. Plasmacytic differentiation is frequently found in cutaneous MALT lymphomas and is a constant and



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often striking feature in thyroid MALT lymphomas, but is relatively rare in gastrointestinal MALT lymphoma. How about thyroid lesion in this case?