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ESPS Peer-review Report
Name of Journal: World Journal of Clinical Cases
ESPS Manuscript NO: 4115
Title: DYNAMIC MECHANICAL ALLODYNIA FOLLOWING FINGER AMPUTATION: UNEXPECTED SKIN HYPERINNERVATION
Reviewer code: 00860822
Science editor: Gou, Su-Xin
Date sent for review: 2013-06-16 09:53
Date reviewed: 2013-06-19 22:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[Y] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

This case presented with a 53-year-old female patient who complained of severe tactile allodynia in her hand after amputation, and the authors concluded from the patient that epidermal hyper-innervations is a possible reason for this situation. I have some concerns on this topic: 1. The paper focused on skin innervations after nerve injury, for this condition, some evidence showed it was yes, but some said no. For animal studies, the epidermal hyper-innervations occurred but without original order. In fact, this patient belongs to neuropathic pain after amputation, so the treatment should be concentrated on central nervous system blockade. Yes, capsaicin is a choice, but its effectiveness is limited. 2. The authors used fluorescent biopsy for the skin, but they did not show any figures on this. I suggest this should be included for the case presentation. Also which kinds of markers were used for the biopsy also needs to be clarified. 3. Central sensitization after peripheral nerve injury is a potential mechanism, please discuss this why it is merely from peripheral innervations, but not central machanisms. 4. For the patient, I noticed that she underwent several times of surgeries for removing the neuromas of the digital nerves to her index finger. This is an indicator that the patient's repeated surgery also contributed to her persistent pain because present evidence showed that repeated injury no matter incision or nerve injury, it would increase the chance to develop chronic pain.

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Name of Journal: World Journal of Clinical Cases
ESPS Manuscript NO: 4115
Title: DYNAMIC MECHANICAL ALLODYNIA FOLLOWING FINGER AMPUTATION: UNEXPECTED SKIN HYPERINNERVATION
Reviewer code: 00646355
Science editor: Gou, Su-Xin
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS
Major comments The significance of the current case report would be greatly improved if the images from the fluorescence microscope system indicating the difference in innervation between normal skin and allodynic skin. Minor comments: Abstract: 1. ...sensation evoked by gentle stroking the skin. Should be "sensation evoked by gently stroking the skin" 2. "In conclusion,neurodiagnostic skin biopsy might represent an useful tool for derangements..." please rephrase the sentence as "In conclusion,neurodiagnostic skin biopsy might represent an useful tool for detecting derangements..."