



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 73589

Title: Successful apatinib treatment for advanced clear cell renal carcinoma as a first-line palliative treatment: a case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

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: 2021-12-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-06 20:33

Reviewer performed review: 2021-12-13 12:54

Review time: 6 Days and 16 Hours

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	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

Novel interesting case report; the authors should cite the following recent paper regarding the presented specific clinical issue entitled: "Current imaging evaluation of tumor response to advanced medical treatment in metastatic renal-cell carcinoma: Clinical implications" by Caruso M, et al. Applied Sciences 2021; 11 (15) 6930; DOI 10.3390/app11156930.



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Title: Successful apatinib treatment for advanced clear cell renal carcinoma as a first-line palliative treatment: a case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05449164

Position: Peer Reviewer

Academic degree: MDS

Professional title: Medical Assistant

Reviewer's Country/Territory: Peru

Author's Country/Territory: China

Manuscript submission date: 2021-12-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-06 21:01

Reviewer performed review: 2022-01-10 20:02

Review time: 3 Days and 23 Hours

Scientific quality	<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
Language quality	<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
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SPECIFIC COMMENTS TO AUTHORS

I consider that the paper is publishable in the World Journal of Clinical Cases after a major revision, especially in discussion part. I am pleased to suggest this manuscript for publication in the journal if the above suggestions are incorporated and the paper is thoroughly edited. In addition, I made some suggestions in order to correct or incorporate in the manuscript: 1. Section MULTIDISCIPLINARY EXPERT CONSULTATION: I consider that it is not necessary to specify the departments and hospitals in which the patient was treated. Please summarize them in a paragraph that follows the sequence of the medical history. 2. Section FINAL DIAGNOSIS: Please add the patient's risk according IMDC score. 3. The patient was treated with Apatinib since April 2021; however, in the Figure 3 Is the patient's progression to TKI seen, have you considered start with immunotherapy? (Nivolumab)