



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 72674

Title: Serum-negative Sjogren's syndrome with minimal lesion nephropathy as the initial presentation: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03086186

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor, Attending Doctor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2021-10-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-26 03:23

Reviewer performed review: 2021-10-26 03:44

Review time: 1 Hour

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 Grade E: Do not publish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 type="checkbox"/> Accept (General priority) <input checked="" 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

The authors described a case of nephrotic syndrome. Evidence including lip salivary gland inflammation and decreased tear flow suggests that SS may be the cause. Renal tubular atrophy and interstitial fibrosis were occasionally observed under light microscopic analysis in this case. Interstitial inflammatory cell focal aggregation is a common pathological manifestation of renal damage in SS. Please highlight these findings in figures. Differential diagnosis of other autoimmune diseases are needed. Please check more autoantibodies to identify what constitutes ANA in the case. .



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Title: Serum-negative Sjogren's syndrome with minimal lesion nephropathy as the initial presentation: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03593092

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Chief Physician, Neurosurgeon

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2021-10-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-23 03:28

Reviewer performed review: 2021-12-05 15:05

Review time: 12 Days and 11 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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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

This case report presented an atypical primary Sjogren’s syndrome (pSS) with minimal lesion nephropathy and negative SS-A and SS-B antibody serology, which was a rare case. Although this case report is intriguing, the manuscript should be substantially revised to highlight the novelty of this case. 1. In Case Presentation, the reasons supported the final diagnosis of pSS should be revised for clarity. The phrase like “SS was not exclude....” is not the positive description for the final diagnosis. 2. When was this patient discharged from the hospital? 3. Justification of final diagnosis of an atypical pSS should be the first priority in the Discussion section and the following issues should be discussed: Negativity of SS-A and SS-B antibody serology was significantly more common in later-onset pSS, compared to early-onset pSS. A 43-year-old female patient was presented in this case report, which is later-onset according to the classification of Wei et al. (2021). Wei L, Zhifei X, Xiaoran N, Meilu L, Yang L, Yixuan L, Xiuying R, Yashuang S, Jingjing C, Shaoying G, Liu Y, Lijun S, Fengxiao Z, Wen Z. Patients with early-onset primary Sjögren's syndrome have distinctive clinical manifestations and circulating lymphocyte profiles. *Rheumatology (Oxford)*. 2021 Apr 20:keab367. doi: 10.1093/rheumatology/keab367. Epub ahead of print. PMID: 33878180. Notably, a positive ANA test is also common in healthy individuals. Li QZ, Karp DR, Quan J, Branch VK, Zhou J, Lian Y, Chong BF, Wakeland EK, Olsen NJ. Risk factors for ANA positivity in healthy persons. *Arthritis Res Ther*. 2011 Mar 2;13(2):R38. doi: 10.1186/ar3271. PMID: 21366908; PMCID: PMC3132017. 4.

For better logic flow and readability, awkward sentences and grammatical errors should be corrected. For example; “Therefore, early diagnosis and realization of the



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effect of pSS on kidney disease is important.” This statement did not reflect the scope of this case report. “However, under the current laboratory diagnostic technology, the corresponding autoantibodies cannot be detected in the serum of some pSS patients...”
Did Authors refer to the limited diagnostic technology of their hospital?