



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 73012

Title: Simultaneous multiple primary malignancies diagnosed by endoscopic ultrasound-guided fine-needle aspiration: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05083802

Position: Editorial Board

Academic degree: DNB, MBBS, MCh, MS

Professional title: Additional Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2021-11-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-08 08:40

Reviewer performed review: 2021-11-08 17:45

Review time: 9 Hours

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|---------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish |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 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

Authors have reported a rare case of the synchronous primary tumor in the pancreas and liver preoperatively diagnosed by preoperative EUS-FNAC. However, the authors need to address the following issues. 1. Imaging showed multiple liver tumors. Authors need to describe the type of liver resection performed 2. What was the final histopathology of the liver tumor as preoperative FNAC showed signet ring cells. If it is signet ring cell adenocarcinoma, whether a colorectal primary was ruled out 3. What was the neoadjuvant chemotherapy given as the patient had a different types of tumors in the pancreas and liver 4. Whether EUS-FNA of the liver had any advantage over percutaneous FNAC. The proposed advantage of EUS-FNA of the pancreatic lesion may not be applicable to the liver lesion



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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03537202

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Adjunct Professor, Doctor, Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-11-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-15 16:17

Reviewer performed review: 2021-11-16 20:42

Review time: 1 Day and 4 Hours

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|---------------------------|---|
| Scientific quality | <input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No |
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SPECIFIC COMMENTS TO AUTHORS

Authors reported a rare case of synchronous liver and pancreatic multiple primary malignancy (MPM) confirmed by EUS-FNA, although the lesions was firstly misdiagnosed as primary pancreatic cancer with multiple liver metastases by CT and PET/CT. Authors concluded that MPMs, although rare, should be considered in patients with pancreatic mass and suspected metastatic lesions, and EUS-FNA has proven to be a minimally invasive and accurate preoperative diagnosis method. STATUS: ACCETTABLE FOR PUBLICATION PENDING MINOR REVISIONS General considerations: This is a CASE REPORT article. The paper is well-written. The work is very interesting and there are only a few articles in literature about this topic. The teaching that can be learned from reading the article makes it extremely useful for spreading the concept of MPMs, which remain few known to the public. I recommend its publication, pending minor revisions. Abstract: the abstract appropriately summarize the manuscript without discrepancies between the abstract and the remainder of the manuscript. Keywords: adequate. Paper On some aspects, the authors should address: 1)In the text (abstract) you wrote “synchronized liver and pancreatic MPMs”. According with the Warren and Gates definition, I would prefer that you use the word “synchronous”. 2)You defined: “Multiple primary malignancies (MPMs) refer to more than one primary malignancy in the same or separate organs of the same patient, and MPMs are considered when different histological or morphological characteristics are detected”. I believe that the word “morphological” is misleading. I would propose to eliminate it. 3)Was a preliminary transabdominal US examination performed? If so, please insert the images. 4)In the text, you never specify



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how exactly EUS-FNA was carried out. Was it FNAB (biopsy) or a FNAC (cytology)? Please specify carefully. 5) You wrote: "Three senior pathologists in our medical university confirmed that the considerable differences in immunohistochemical results indicated that the pancreatic mass and multiple liver nodules were not metastatic lesions from the other. The final diagnoses were listed as follows: 1. Simultaneous liver and pancreatic MPMs; 2. Pancreatic pseudocyst". Why don't you specify the definitive histopathological diagnoses? Was it a pancreatic adenocarcinoma? or a NET? Please, specify it. 6) It should be mentioned how often MPMs metastasize to the liver, most commonly in colon tumors. This can be found in an article similar to the one proposed, which you must cite, emphasizing above all the aspect that liver lesions are more often considered metastases rather than primary tumors. -Corvino A, Corvino F, Radice L, Catalano O. Synchronous mucinous colonic adenocarcinoma and multiple small intestinal adenocarcinomas: report of a case and review of literature. *Clin Imaging*. 2015 May-Jun;39(3):538-42. doi: 10.1016/j.clinimag.2014.12.019. Epub 2015 Jan 7. Reference: please, add the ones that I suggested you.