

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 73961

Title: Isolated cryptococcal osteomyelitis of the ulna in an immunocompetent patient: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01221666

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Doctor, Surgeon

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2021-12-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-21 01:15

Reviewer performed review: 2021-12-24 08:01

Review time: 3 Days and 6 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 Grade E: Do not publish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="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

This case report illustrates isolated cryptococcal osteomyelitis of the ulna in an old lady.

Comments 1. Terminology issue. Histopathology report is chronic suppurative osteomyelitis. Can this occur in (or equal to) cryptococcal osteomyelitis? 2. How do you explain the hematogenous dissemination of cryptococcus osteomyelitis in this patient with high CRP but neg crptococcal antigen in blood? 3. Therapeutics issue. Treatment upgraded from fluconazole to voriconazole because of high MIC for fluconazole during hospital stay, but oral fluconazole was prescribed back in clinic one month later due to decreased value of blood inflammatory markers. Did the marker increase after shifting? Did oral medication at this point actually not need anyway? Why the lady carry a cryptococcal strain with high MIC to fluconazole? Did the patient actually receive previous treatment before?

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06193940

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Lecturer

Reviewer's Country/Territory: Viet Nam

Author's Country/Territory: China

Manuscript submission date: 2021-12-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-21 07:47

Reviewer performed review: 2021-12-26 04:48

Review time: 4 Days and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" 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 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
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SPECIFIC COMMENTS TO AUTHORS

Summary The authors reported a rare case of cryptococcal osteomyelitis in the ulna in a non-immunocompromised patient. The patient showed successful outcome after receiving antifungal therapy combined with surgery debridement. I still have following minor concerns regarding the manuscript. There are some problems with syntax, and informal word usage (very, almost, little...). There are also several word and line spacing error, capitalization, and typographic errors (line 99, 143, 167, 185, 190, 206...). Please edit carefully for these and obtain editorial help if necessary. Please write out the full words when using the first time (AIDS, HIV, IV). Line 100 – 102: Please rewrite the phrases since the description was complicated (the legend of figure 3 described more appropriately). Line 176 – 179: Please rewrite the questions to a noun clause. References: Please check the format of each reference. Figures: It would be better if the authors could use the marker showing the lesions in each figure.