

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 76411

**Title:** Relapsing polychondritis causing breathlessness: A report of two cases

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 00863327

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Full Professor

**Reviewer's Country/Territory:** Taiwan

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-03-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-13 12:07

**Reviewer performed review:** 2022-04-13 13:26

**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 Grade E: Do not publish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
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

In this interesting case report, the authors described two uncommon advanced relapsing polychondritis (RP) involving the larynx/trachea and presenting with dyspnea. They emphasized that RP involving the larynx/trachea can be easily misdiagnosed due to the atypical symptoms, and clinicians should improve the awareness of this disease to make timely diagnosis and conduct individualized treatment. The findings in the manuscript are relevant to the clinical application. There are some minor issues needed to be clarified as follows. 1. In the keywords, the authors should remove diagnosis, treatment and case report. 2. Since the authors used RP as an abbreviation for relapsing polychondritis in the first sentence of Introduction section, they should use this abbreviation through the manuscript. 3. The authors should put the references [4] and [6] at the back of “referring to the Damiani Standard” and “referring to the Rose standards”, respectively. 4. The authors should provide the names of immunosuppressive agents used outside the hospital on a long-term basis in Case 1. 5. The authors should use methylprednisolone “plus” immunosuppressant rather than “+” in the manuscript.

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**Reviewer's code:** 05340927

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Adjunct Associate Professor, Doctor, Surgical Oncologist

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** China

**Manuscript submission date:** 2022-03-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-13 07:29

**Reviewer performed review:** 2022-04-22 06:54

**Review time:** 8 Days and 23 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

1- The title reflect the main subject/hypothesis of the manuscript. 2- The abstract summarize and reflect partially the work described in the manuscript. 3- The key words reflect the focus of the manuscript 4- The manuscript does not describe adequately the background. The author should write something about the etiology, the incidence and specify the treatment. Furthermore, he should write something about de laryngotracheal stenosis depending on the age (the prognosis is worse in children than adults). 5- Methods. The author should specify the test for ruling out tuberculosis, like some Smear microscopy (Ziehl -Neelsen ), bacilloscopy o type of biopsy. The author should explain why used CT and not MR. 6- Result. The author don't achieve a clear contribution of that study. Any new treatment or relevant test can't be found in this manuscript. 7- Discussion. The author should compare their finding with another results of the literature ( there are few articles in discussion). Lines 125-128 are introduction,not discussion. 8- Illustration and Tables: Can be improved. 9- Biostatisc. It's a case report. Not requiered. 10- Unit. OK. 11- References. The author should add some high impact factor journals where the author compare to other treatment and options, like : "Laryngeal manifestations of relapsing polychondritis and a novel treatment option. Lesley F Childs et al." "Three Cases of Relapsing Polycondritis with Isolated Laryngotracheal Stenosis. Hamdi Taşlı et al" " Tracheal stenosis as a initial manifestation of relapsing polychondritis. Case report. Silvia Méndez-Flores et al." 12- Quality of manuscript organization and presentation. Lots insuitable words unusual for ENT report. The manuscript should be re-edited by and scientific translator editor. 13- Research methods and reporting. OK. 14- Ethics statements.OK.