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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 77608

Title: Intravitreous injection of conbercept for bullous retinal detachment: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06225824 Position: Peer Reviewer Academic degree: MD

Professional title: Surgeon

Reviewer's Country/Territory: Tunisia

Author's Country/Territory: China

Manuscript submission date: 2022-05-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-20 16:14

Reviewer performed review: 2022-05-26 15:26

Review time: 5 Days and 23 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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

SPECIFIC COMMENTS TO AUTHORS

The authors present a case report of a bullous retinal detachment treated with intravitreous injection of conbercept. The subject is important and the writing is good. However, there are some concerns that should be pointed out: 1- In the introduction (L35-37): "Bullous retinal detachment, an extremely rare manifestation of diffuse retinal pigment epitheliopathy (DRPE) or chronic central serous chorioretinopathy (CSCR), is difficult to treat and can eventually result in loss of vision due to irreversible retinal damage (1-2). " I think the sentence is too long. "Bullous retinal detachment is an extremely rare manifestation of diffuse retinal pigment epitheliopathy (DRPE) or chronic central serous chorioretinopathy (CSCR). It is difficult to treat. It can eventually result in loss of vision due to irreversible retinal damage (1-2)." would be clearer. 2- The discussion section should start with a brief summary of the case. The strengths and the weaknesses of the work should be pointed out. 3- (L129-131) "At the time of presentation, our patient mentioned that she was worried about her daughter's diabetes, and was therefore in a state of long-term anxiety, which might have been one of the causes of her illness." This sentence is too long and unnessary to write in a scientific article. I suggest " The stress factor was present in our case". 4- In the conclusion, the authors should summarize their case report before the scientific generalities. 5- The reference N°16 is too old. It would be better to use an updated reference.



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Reviewer's code: 06113228 Position: Peer Reviewer Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Mexico

Author's Country/Territory: China

Manuscript submission date: 2022-05-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-21 16:11

Reviewer performed review: 2022-05-30 05:40

Review time: 8 Days and 13 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
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Line 43: Delete this text. It is convenient that this therapeutic agent be briefly described in this section. Line 75: How was that dose determined? Line 77: How much time passed between the first and the second injection? Line 78: Was the dose of the first injection the same as the second injection? Line 90: This text must be included in the pathophysiology section. Line 125: Although it is interesting and important to note that this is the first case treated with conbercept, it is convenient to highlight the main possible advantages over other VEGF inhibitors. Line 137: VEGF inhibitors instead of "compatriot"? In the discussion section it is important to justify the use of conbercept instead of other therapeutic agents and delve into the possible mechanism of action of this group of drugs in DRPE.