

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 79182

Title: Clinical Features and Prognosis of Seven Patients with Multiple Myeloma and Orbital Extramedullary Disease

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06242407

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2022-08-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-11 11:55

Reviewer performed review: 2022-08-12 17:46

Review time: 1 Day and 5 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 Grade E: Do not publish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
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

Dear Authors, you made a great work! However, just some little changes are required before acceptance.

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Manuscript NO: 79182

Title: Clinical Features and Prognosis of Seven Patients with Multiple Myeloma and Orbital Extramedullary Disease

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05601558

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-24 04:31

Reviewer performed review: 2022-09-01 10:06

Review time: 8 Days and 5 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
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Re-review	<input checked="" type="checkbox"/> Yes <input 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

The authors provide data regarding EMD. Despite the lack of novelty, the topic is interesting. Suggestions: 1. I would suggest to restructure the manuscript as follows: Part 1 – Working Title, WHAT happened: Timeline and Narrative Develop a descriptive and succinct working title that describes the phenomenon of greatest interest (symptom, diagnostic test, diagnosis, intervention, outcome). WHAT happened. Gather the clinical information associated with patient visits in this this case report to create a timeline as a figure or table. The timeline is a chronological summary of the visits that make up the episodes of care from this case report. Narrative of the episode of care (including tables and figures as needed). The presenting concerns (chief complaints) and relevant demographic information. Clinical findings: describe the relevant past medical history, pertinent co-morbidities, and important physical examination (PE) findings. Diagnostic assessments: discuss diagnostic testing and results, a differential diagnosis, and the diagnosis. Therapeutic interventions: describe the types of intervention (pharmacologic, surgical, preventive, lifestyle) and how the interventions were administered (dosage, strength, duration, and frequency). Tables or figures may be useful. Follow-up and outcomes: describe the clinical course of the episode of care during follow-up visits including (1) intervention modification, interruption, or discontinuation; (2) intervention adherence and how this was assessed; and (3) adverse effects or unanticipated events. Regular patient report outcome measurement surveys such as PROMIS® may be helpful. Part 2 – WHY it might have happened: Introduction, Discussion, Conclusion The introduction should briefly summarize why this case report is important and cite the most recent CARE article (Riley DS, Barber MS,



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Kienle GS, AronsonJK, et al. CARE guidelines for case reports: explanation and elaboration document. JClinEpi 2017 Sep;89:218-235. doi: 10.1016/j.clinepi.2017.04.026).

WHY it might have happened. The discussion describes case management, including strengths and limitations with scientific references. The conclusion, usually one paragraph, offers the most important findings from the case without references. Part 3 – Abstract, Keywords, References, Acknowledgements, and Informed Consent Abstract. Briefly summarize in a structured or unstructured format the relevant information without citations. Do this after writing the case report. Information should include: (1) Background, (2) Key points from the case; and (3) Main lessons to be learned from this case report. Keywords. Provide 2 to 5 keywords that will identify important topics covered by this case report. References. Include appropriately chosen references from the peer-reviewed scientific literature. Acknowledgements. A short acknowledgements section should mention funding support or conflicts of interest, if applicable. Informed Consent and Patient Perspective. The patient should provide informed consent (including a patient perspective) and the author should provide this information if requested. Some journals have consent forms which must be used regardless of informed consents you have obtained. Rarely, additional approval (e.g., IRB or ethics commission) may be needed. The patient should share their perspective on the treatment(s) they received in one to two paragraphs. It is often best to ask for informed consent and the patient's perspective before you begin writing your case report. 2. The rationale of why the authors came up with this review. 3. What is the information that is not exactly available that motivated the authors to come up with this information. What are the current caveats and how do the authors highlight the current research in answering them? If not they need to address in future directions. 4. The authors need to highlight what new information the review is providing to enhance the research in progress. 5. The authors could provide a little more consideration of genomic directed



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stratifications in clinical trial design and enrollments. 6. The underlying message here is that more precision and individualized approaches need to be tested in well designed clinical trials – a challenge, but I would be interested in their perspective of how this might be done. 7. This author personally misses some background and novel insights regarding biological mechanisms underlying the novel therapeutic targeting: please refer to PMID: 32043788 and expand.