

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 68925

Title: Pregnancy-Induced Leukocytosis: Case report.

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05418901

Position: Editorial Board

Academic degree: MBBS, MD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-07-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-01 02:01

Reviewer performed review: 2022-08-01 02:10

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 Grade E: Do not publish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 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
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

The authors describe a case of a patient with benign leukocytosis during pregnancy which resolved after completion of pregnancy. I have couple of questions and comments.

1. Please mention the occupation of the patient. Excessive exposure to work related smoke can lead to leukocytosis which may have accentuated during pregnancy. 2. Please mention if the patient smoked or not, or if she was exposed to second hand smoking during pregnancy. 3. Please mention if there was a history of previous steroid use or hormonal therapy during pregnancy. 4. Authors must review the causes of leukocytosis in a table. Please review and cite following article from PUBMED which described various causes of lymphocytosis. PMID: 31747226

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Peer-review model: Single blind

Reviewer's code: 05914837

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Latvia

Author's Country/Territory: China

Manuscript submission date: 2022-07-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-31 14:42

Reviewer performed review: 2022-08-04 11:05

Review time: 3 Days and 20 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 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

Dear authors, Thank you for sharing your intriguing case report on pregnancy induced leukocytosis. I do recommend publication after the following major changes: 1. Please add reference to the line in introduction - The normal range for WBC counts changes with age and pregnancy. 2. Please add reference to the line in introduction - Physiological leukocytosis often takes place and it is primarily related to the increased circulation of neutrophils, especially during the last trimester of pregnancy 3. I couldnt see Figure 1 in the submission files. 4. Please provide also normal ranges of laboratory examinations in brackets including Leukocyte count, neutrophils, CRP, ESR, and PCT. 5. Please provide differential diagnosis for the patient and also justify how you excluded all possible differential diagnosis in the patient to conclude asymptomatic leukocytosis as the final diagnosis for the patient. The diagnosis of asymptomatic leukocytosis is a diagnosis of exclusion and hence exploring differential diagnosis is pertinent in this case. 6. Everything mentioned under the heading "Treatment" is patient history and not treatment. Please correct this heading and add a separate treatment section describing the treatment that was given to the patient post diagnosis of leukocytosis. 7. There is mentioned "Outcome and Follow-up" as heading 2 times. Please correct the headings. 8. I would recommend authors to remove the words "literature review" from the heading as they have not provided a review of literature. Its a case report.

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Peer-review model: Single blind

Reviewer's code: 06139976

Position: Peer Reviewer

Academic degree: Doctor, MD

Professional title: Doctor, Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-07-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-02 08:10

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Review time: 4 Days and 4 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
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

This is an excellent case report on pregnancy-associated leukaemia syndrome. Overall, the presentation and discussion of the case is adequate. I have several questions for you. I hope these points have been considered and this case report has been brushed up to a better one. [Infections] In some infections, typical symptoms such as fever and chills do not always present. Has culture testing of the patient's blood, urine and saliva samples been carried out? [Autoimmune diseases] The authors list infection, allergy, malignancy, surgery, trauma and heavy physical activity as causes of leukaemia syndromes. I suggest that autoimmune diseases, such as collagen diseases, should be added to them. In particular, it is recommended to identify antiphospholipid syndrome and systemic lupus erythematosus in patients with abnormal blood cell counts associated with pregnancy. Has the need to test for antinuclear antibodies in the patient been considered? [Effects of pregnancy] In the discussion, the association between IVF and elevated white blood cell counts is discussed. Was the patient herself pregnant by IVF or not? The patient also had a history of polycystic ovary syndrome. Is there any association between the patient's changes of LH and FSH and her white blood cell count?

[Treatment] As the authors point out, termination of pregnancy is effective in refractory pregnancies complicated by leukaemia. In this case, the caesarean section improved the patient's leukaemia syndrome and neither the patient nor her baby had any adverse events. However, if a patient has leukaemia and her foetus is developing poorly at the time she has leukaemia, could the option of reducing the white blood cells with corticosteroids or immunosuppressive treatment and continuing the pregnancy be considered?

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Peer-review model: Single blind

Reviewer's code: 03604107

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Albania

Author's Country/Territory: China

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Review time: 7 Days and 22 Hours

Scientific quality	<input 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 checked="" type="checkbox"/> Grade E: Do not publish
Language quality	<input 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 checked="" type="checkbox"/> Grade D: Rejection
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statements

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

SPECIFIC COMMENTS TO AUTHORS

The paper is confusing, and in dire need of a thorough English editing. Several grammatical errors make the narrative ineligible. Details are too much and contradictory. Lines 30 - 31 : After 24 hours of cesarean section, neutrophil granulocyte returned to normal. Lines 157 etc: The first postoperative day, the counts of white blood cell were 14.71×10^9 per L, the counts of the neutrophil granulocyte were 11.26×10^9 per L, So, there was no return to normality of the leucocyte count ! What do you mean by stating: "Next day she had a cesarean section because of fetal distress"; when at the conclusions, you say : We also suggest that termination of pregnancy may be an effective treatment for pregnancy complicated with leukocytosis. So, the cesarean section was due to fetal distress (which makes sense !) or to leukocytosis (which makes no sense at all!) Also, in the case report you say: complaining of leukocytosis with increasing blood pressure. There is no patient that can complain of leukocytosis !!! Please give instead complete details of the clinical symptomatology.

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Reviewer's code: 06250974

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor, Doctor, Instructor, Staff Physician, Teacher

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

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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	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

Thank you for the opportunity to review this work. -1 Title. Does the title reflect the main subject/hypothesis of the manuscript? Yes -2 Abstract. -There was a similar sentence published in a previous case report. "Physiological leukocytosis often takes place and it is primarily related to the increased circulation of neutrophils, especially during the last trimester of pregnancy." was found in an abstract of "Medicine (Baltimore) . 2016 Dec;95(52):e5717. doi: 10.1097/MD.0000000000005717. URL=<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5207571>." Please consider rephrasing it. -3 Key words. Do the key words reflect the focus of the manuscript? Yes.

-4 Background. -There were some similar sentences published in a previous article without citation. "It is important for clinicians to be able to distinguish malignant from non-malignant etiologies, and to differentiate between the most common nonmalignant causes of leukocytosis." and "During pregnancy, there is a gradual increase in the normal WBC count (third trimester 95% upper limit = ..." were found in "Am Fam Physician . 2015 Dec 1;92(11):1004-11. URL=<https://www.aafp.org/pubs/afp/issues/2015/1201/p1004.html>." Please consider rephrasing it. -5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? Not applicable. -6 Results. -There were two "Outcome and follow-up" sections. In the first place, there seems to be summarized of this case again. Moreover, the "outcome and follow up" section was found that similar to the previous "treatment" section. Please improve the "Outcome and follow-up" section and may present it as a timeline table or figure. -7 Discussion. -Again, a similar sentence was published in a previous article without citation. "Hematological diseases in pregnancy should be carefully managed with a



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multidisciplinary approach, which should include obstetrics, hematology and, in selected patients, apheresis professionals." were found in an abstract of "Transfus Apher Sci . 2015 Dec;53(3):279-82. doi: 10.1016/j.transci.2015.11.007. URL=<https://pubmed.ncbi.nlm.nih.gov/26621538>." Please consider rephrasing it. -8 Illustrations and tables. -The author mentioned that there was a figure in the manuscript. However, it was not available to review. -9 Biostatistics. Does the manuscript meet the requirements of biostatistics? Not applicable. -10 Units. Does the manuscript meet the requirements of use of SI units? -Please use a unit of measurement consistently throughout the manuscript. The authors reported in the discussion section as "... the average WBC in a laboring patient was 12,450, with a range of 4,400 to 29,100." However, they presented as " $\times 10^9$ per L" in the others. -11 References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? -Yes -12 Quality of manuscript organization and presentation. -Please recheck about the word "table" in the sentence in treatment section "...vitamin complex tablet 1 table a day until 12 weeks of gestation." -13 Research methods and reporting. -Yes -14 Ethics statements. Did the manuscript meet the requirements of ethics? Yes

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Peer-review model: Single blind

Reviewer's code: 06277946

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Academic degree: MD

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Reviewer's Country/Territory: India

Author's Country/Territory: China

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Review time: 12 Days and 10 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 checked="" type="checkbox"/> Accept (General priority) <input 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



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statements

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

SPECIFIC COMMENTS TO AUTHORS

This is known. Why TLC done at 27wks