



## PEER-REVIEW REPORT

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

**Manuscript NO:** 71922

**Title:** Synchronous but separate neuroendocrine tumor and high-grade dysplasia/adenoma of the gall bladder: A case report

**Provenance and peer review:** Unsolicited manuscript; externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05937294

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Doctor, Research Assistant Professor

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

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

**Manuscript submission date:** 2021-10-05

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-10-05 16:18

**Reviewer performed review:** 2021-10-12 19:51

**Review time:** 7 Days and 3 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 Grade E: Do not publish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



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<b>Peer-reviewer statements</b>	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**

The authors reported an interesting case of synchronous but separated neuroendocrine tumor and high-grade dysplastic adenoma in gall bladder. There are a few issues that should be addressed by the authors before consideration for publication: -----

1. The authors should explain how their findings make a difference for the readers of the Journal of World Journal of Gastroenterology?
2. Improvements to the English language within your manuscript are requested.
3. The caption of histopathological feature is inappropriate. You should have mentioned the histopathological related character and qualification such as accumulation of some specific cells, and also determine it by arrow on the figure.



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**Reviewer’s code:** 05388269

**Position:** Peer Reviewer

**Academic degree:** MD, RN

**Professional title:** Assistant Professor, Attending Doctor, Doctor, Nurse, Research Assistant, Staff Physician, Statistician, Surgeon

**Reviewer’s Country/Territory:** Philippines

**Author’s Country/Territory:** Taiwan

**Manuscript submission date:** 2021-10-05

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-10-06 10:33

**Reviewer performed review:** 2021-10-14 05:28

**Review time:** 7 Days and 18 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 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
<b>Conclusion</b>	<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



<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

Neuroendocrine tumors with synchronous adenocarcinoma Tis in the gallbladder are very rare thus clinical guidelines in their management are lacking. Your paper is well written however with minor issues: 1. The case presented may be improved by presenting it in chronological order. 2. In the case presentation, especially when mentioned that cholangitis was suspected, maybe the authors can also present the findings of CBC/WBC, CRP, ALP, r-GTP (GGT), AST, and ALT levels if available. These are the parameters mentioned in the Tokyo guidelines 2018. Did the patient present with fever/chills?; 3. This could be anecdotal but IgG-4 is not routinely examined in most patients with narrowing of the distal CBD. Maybe the authors can state whether this was routine in their practice? Secondly, was there any effort to document the cause of the CBD stricture? Whether benign or malignant through the use of ERCP with/without EUS with cytology brush and/or FNAB. And if this was discussed preoperatively with the patient on the management plan with the stricture/narrowing of the CBD? 4. Can authors give (if available) distant between the findings of adenoCA in situ and neuroendocrine, was it near the GB neck, fundus?. To correlate with your title as "seprated" 5. The patient presented ultimately with a 2cm polyp lesion in the gallbladder 2 years later. What was the initial size on ultrasound? How frequent/regular was the follow-up after the initial consultation? This is important since majority of the guidelines regarding observation of GB polyps will say that the cut-off to perform surgery is 10mm in size. 6. If the authors can include in the Case presentation, MRCP finding of the CBD on top of the 2cm tumor in the GB neck. 7. Was there any mention



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of intraop/gross findings? Like appearance of CBD? Was GB outersurface adherent to liver bed, the decision to proceed with a partial liver resection. And no plan of intraop Frozen section? 8. Can also include long-term plan other than surveillance, on the documented long segment stricture in the distal CBD. 9. Discussion overall is well written although lack some/minor scientific information. There are reports, although rare of synchronous CBD and GB adenocarcinoma, maybe include a small discussion. 10. Also in the discussion, maybe the authors can also include management/guidelines of GB polyps. Observation to surgery, risk of malignancy.



**RE-REVIEW REPORT OF REVISED MANUSCRIPT**

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**Academic degree:** MD

**Professional title:** Doctor, Research Assistant Professor

**Reviewer’s Country/Territory:** Iran

**Author’s Country/Territory:** Taiwan

**Manuscript submission date:** 2021-10-05

**Reviewer chosen by:** Ji-Hong Liu

**Reviewer accepted review:** 2021-12-09 18:20

**Reviewer performed review:** 2021-12-09 18:35

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Peer-reviewer</b>	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



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statements

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

#### **SPECIFIC COMMENTS TO AUTHORS**

I edited the manuscript by track change and uploaded it.