

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 83175

Title: Treatment of postherpetic neuralgia by bone marrow aspirate injection: World's first case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05655782

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2023-01-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-02-02 15:15

Reviewer performed review: 2023-02-04 10:35

Review time: 1 Day and 19 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 Grade E: Do not publish
Novelty of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" 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 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 statements	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

This article introduces a case of treatment of postherpetic neuralgia by bone marrow aspiration injection, which has achieved good treatment effect and provided alternative treatment schemes for patients with clinically severe PHN. However, more cases and in-depth studies are still needed. This case has certain clinical significance.

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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: Japan

Manuscript submission date: 2023-01-29

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-02-21 04:16

Reviewer performed review: 2023-02-24 05:37

Review time: 3 Days and 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 statements	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

The case report presented in this study suggests that bone marrow aspirate concentrate (BMAC) injection containing bone marrow mesenchymal stem cells could be a radical therapy for post-herpetic neuralgia (PHN), a difficult-to-treat complication of herpes zoster. This finding could be valuable for clinicians as PHN is a common and debilitating condition that is often resistant to conventional pain-relief drugs. BMAC injection may provide an alternative treatment option for patients who have not responded to other therapies. Furthermore, the fact that BMAC has been found to be useful in the treatment of PHN suggests that it may also be effective for other pain-related conditions beyond joint pain, where it has already been used. However, further research is needed to confirm the efficacy and safety of BMAC injection for PHN and other pain-related conditions. Overall, this study highlights a potential novel therapy that clinicians can consider for patients with PHN who have not responded to other treatments. I would suggest to restructure the manuscript as follows: Writing Sequence 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, Kienle GS, AronsonJK, et al. CARE guidelines for case reports: explanation and elaboration document. JClinEpi 2017 Sep;89:218-235. doi: 10.1016/j.jclinepi.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.



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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. **Appendices (If indicated).** There is a complex interplay between inflammation and the bone marrow microenvironment, specifically how chronic inflammation can lead to aberrant hematopoiesis and potentially promote the development of myeloid malignancies. It underscores the importance of understanding the mechanisms by which inflammation affects the bone marrow niche and hematopoietic stem cells, as well as the downstream effects on differentiation patterns and cellular function. This knowledge can be valuable for clinicians in identifying potential therapeutic targets to address hematopoietic dysfunction associated with chronic inflammation and myeloid malignancies.; the case report highlights the potential therapeutic value of bone marrow mesenchymal stem cells found in BMAC for treating pain syndromes like PHN. Mesenchymal stem cells have been shown to have anti-inflammatory properties, and their use in regenerative medicine has been explored in various inflammatory and degenerative conditions. It's possible that the chronic inflammation process discussed in the first passage could play a role in PHN, given that



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inflammation and nerve damage are involved in the pathogenesis of the condition. However, the case report does not delve into this aspect and focuses on the successful use of BMAC for treating PHN. Overall, the two passages may offer different perspectives on the role of inflammation and stem cells in bone marrow and pain syndromes, respectively. Please refer to 10.20517/2394-4722.2021.166 and expand the introduction/discussion part.