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PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 85733

Title: Synchronous rectal adenocarcinoma and intestinal mantle cell lymphoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06109990

Position: Editorial Board

Academic degree: MBChB, N/A

Professional title: Academic Research, Full Professor, Senior Editor, Surgeon

Reviewer's Country/Territory: Iraq

Author's Country/Territory: Viet Nam

Manuscript submission date: 2023-05-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-05-12 18:26

Reviewer performed review: 2023-05-13 10:07

Review time: 15 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 Grade E: Do not publish
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 article describes a 63-year-old gentleman with synchronous adenocarcinoma of the colorectum and mantle cell lymphoma of the ileum. The article is well-written and informative. However, the following issues should be revised to improve the presentation of the article: 1. The title should be changed owing to that MCL was found in the ileum. Please take care of this point throughout the whole manuscript to remove the confusion to the readers. 2. The running title is long, therefore, I suggest the following "synchronous colorectal adenocarcinoma and ileal MCL". 3. Abstract a. Page 2, line 9: It is better to replace the word "man" with "gentleman". Please do the same throughout the whole manuscript. b. Page 2, line 17: Please write these abbreviations "PET/CT". c. The conclusion should be rewritten depending on your case summary. Please remove this sentence "Our patient presented with abdominal pain due to a large polyp in the small intestine, confirmed as MCL by histology." Because it is related to the case summary. 4. Please add the other 2 keywords to be 6 in number as per journal style. Besides each word should be started with a capital letter. 5. The core Tip is short (47 words). Please rewrite it to be more informative. 6. Introduction a. You should split this



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section into two paragraphs; the first paragraph for the descriptive and the other for the challenging part. b. The challenging part is deficient. c. This sentence " To our knowledge, only a few cases have previously been reported in the literature." Needs a reference. d. This case report is presented in line with the SCARE Criteria[4]. This differs from what was written in the "CARE Checklist (2016) statement: The authors have read the CARE Checklist (2016), and the manuscript was prepared and revised according to the CARE Checklist (2016)". Please unify them. e. There is no objective of the study at the end of this section. 7. Case presentation a. Chief complaints: please mention just the main complaints. b. History of present illness: more detail is needed. You can use what you wrote in the chief complaints. c. 154 g/L. I think you mean 15.4 g/L. d. Please write the full term of each abbreviation. e. Figure 1C is not mentioned in the text. f. Figures 2 and 3 need the main titles in the figures' legends. g. Please remove the writing from Figure 2B. h. Our multi-disciplinary tumor boards → Our multi-disciplinary tumor board. i. Follow-up: I think it is deficient, therefore, it needs more detail. 8. Discussion: a. This "Lymphadenopathy occurs in 90% of cases and frequently involves extranodal sites such as bone marrow, the spleen, gastrointestinal tract, Waldeyer's ring, and lungs." needs a reference. b. B symptoms: please explain these. c. Please take care that you already use the abbreviation "MCL" for the full term "mantle cell lymphoma". d. The section does not explore the differences between this case and other previously reported cases. It is better to add a table for this aim. 9. References a. Only 4 out of 23 references belong to the five years and no reference belongs to the year 2021-2023. Therefore, updating the references is of utmost importance. This link is useful for this purpose <https://pubmed.ncbi.nlm.nih.gov/36509538/>. b. The references should follow the journal style.

PEER-REVIEW REPORT

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Manuscript NO: 85733

Title: Synchronous rectal adenocarcinoma and intestinal mantle cell lymphoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01551432

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Viet Nam

Manuscript submission date: 2023-05-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-05-26 05:43

Reviewer performed review: 2023-05-27 22:05

Review time: 1 Day and 16 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 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

Dear Authors, Thank you for your submitting the manuscript entitled, "Synchronous adenocarcinoma and mantle cell lymphoma of the colorectum: A case report" in WJCC. I think the manuscript is well written and compactly summarized. The topic is timely and very nice. However, several criticisms should be addressed as the followings. 1. Please add a new table summarizing the characteristics of the cases of colorectal cancer with MCL that have been reported to date in Pubmed. 2. Please add the data on tumor markers (CEA, CA19-9, s-IL2-R) in the test results. This is important as it may be a predictor of future recurrence. 3. Did you examine a small bowel endoscopy or small bowel contrast scan? Please add endoscopic images or contrast x-p pictures. 4. The main lesion of the ileal MCL is a large tumor (4 x 6 cm), why was it not detected preoperatively? please add to your discussion a reflection on the need for s-IL2-R, small bowel endoscopy and small bowel contrast studies. Preoperative screenings are important because of the recent increase of the number of gastrointestinal malignant lymphomas in Asia. 5. You should mention "multiple lymphomatous polyposis (MLP)", which refers to the multiple small MCL polyps (2-5 mm) around colorectal cancer and in



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the small intestine. MLP is a disease of the small intestine, the colon, and the large intestine. Please add the extent of MCL involvement in small intestine and colon. 6. The staging of gastrointestinal malignant lymphoma is the Lugano classification. Please revise it. 7. Are there any causative factor or factors behind the coexistence of colorectal cancer and MCL? Please add your own thoughts on this important question. 8. Translocation results can be shown by FISH, please add figures if possible. 9. MCL has a good response to treatment but is prone to recurrence and has a poor prognosis. MCL can be relapsed in the near future in the reported case, I think, because MLP lesions except main tumors has not been resected by surgion, and remained now. Further, you did not confirm whether MLP were cured and disappered with chemotherapy yet. If MCL relapse in both small and large intestine in the near future, what is the best treatment strategies for 2nd line therapy? Monoclonal antibody, bispecific antibody, anti-PD-L1 antibody, Lenaridomide, BTKi, BCL2 inhibitor, epigenetic regulator, PI3K-inhibitor, PI3K/mTOR inhibitor, CAR-T cell therapy have recently shown high efficacy in malignant lymphomas, especially nodal lymphomas. Please briefly mention these future treatment options to your discussion section at the last paragraph.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 85733

Title: Synchronous rectal adenocarcinoma and intestinal mantle cell lymphoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01551432

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Viet Nam

Manuscript submission date: 2023-05-12

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2023-06-19 05:37

Reviewer performed review: 2023-06-19 05:54

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 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
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

I think the manuscript has already been properly revised accordingly. I think the manu will be accepted in wjcc.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 85733

Title: Synchronous rectal adenocarcinoma and intestinal mantle cell lymphoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06109990

Position: Editorial Board

Academic degree: MBChB, N/A

Professional title: Academic Research, Full Professor, Senior Editor, Surgeon

Reviewer's Country/Territory: Iraq

Author's Country/Territory: Viet Nam

Manuscript submission date: 2023-05-12

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2023-06-19 05:13

Reviewer performed review: 2023-06-19 17:33

Review time: 12 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, I appreciate the great efforts in revising your manuscript. However, I see that the authors have not revised the manuscript well because: 1. It is great to defense on your work with a scientific way. However, I see that some notes you try to defense but in a wrong way (for example, the introduction should be rewritten into 2 paragraphs according to CARE Checklist 2016). Please take care of these. 2. The authors are missing some of the raising points such as the writing the full-term of the abbreviations (PET/CT) in the abstract. 3. I'd like to draw your attention to the following: Yes, I found a file titled [85733-Answering-Reviewers-revision.docx] that answers the reviewers' directives for the research team in the paper, but the other file titled [85733_Auto_Edited.docx] doesn't explain what was done. I hope the author(s) would highlight the paper's revisions in "yellow color" or "add comments" on the Word file [82948_Auto_Edited.docx] to make follow-up easier to follow up on actually added edits. I hope that the authors should take these issues seriously in the second revision round.

Warm greeting