

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 86526

Title: Helicobacter pylori eradication treatment for primary gastric diffuse large B-cell lymphoma: A single-center analysis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03009411

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor, Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2023-07-04

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-16 09:36

Reviewer performed review: 2023-07-23 09:30

Review time: 6 Days and 23 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 Grade E: Do not publish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 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 checked="" type="checkbox"/> Grade B: Good <input 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

There is already a consensus recommending eradication of *Helicobacter pylori* as the first line treatment for gastric MALT lymphoma. For the treatment of gastric DLBCL lymphoma, chemotherapy and radiation therapy are currently the main options. The authors reported 6 cases, all 3 cases with single lesions achieved complete remission after *Helicobacter pylori* eradication. In contrast, none of the 3 patients with 2 lesions achieved CR. They suggested it is worthwhile to attempt *Helicobacter pylori* eradication for elderly patients with primary gastric DLBCL in a single lesion with a small tumor burden. The number of tumors may be an important factor affect the efficacy of *Helicobacter pylori* eradication treatment for gastric DLBCL lymphoma. There are some problems: Case 2 patient has IgG4 related disease, which organs or systems are specifically affected by her IgG4 related disease? Case 3 patient was found with gastric DLBCL due to his fever sign. Is the patient's fever sign related to lymphoma? Or is it related to other reasons? In Table 1, it is shown that the patient has a comorbidity with MGUS, but there is no relevant information in the text description of the article.