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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 81499

Title: Motor cortex transcranial magnetic stimulation to reduce intractable postherpetic

neuralgia with poor treatment response: evidence from two cases

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00526025 Position: Editorial Board Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-11-14

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-11-17 02:35

Reviewer performed review: 2022-11-23 04:31

Review time: 6 Days and 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

You reported two patients with postherpetic neuralgia who received repeated transcranial magnetic stimulation, and claimed that the postherpetic neuralgia decreased after repeated transcranial magnetic stimulation. The manuscript needs amendments. 1. Approvals from the patients need to be stated in the manuscript. 2. One patient received repeated transcranial magnetic stimulation four months and another six months after the onset of herpes zoster, indicating it cannot be excluded the pain decreased due to natural course of zoster-related pain. 3. You used to describe pain levels with visual analog scale and present pain intensity. You need to state what the difference(s) between "pain level measured with visual analog scale" and "present pain intensity." 4. Page 1, line 8: I would recommend "analgesics," instead of "drug analgesia." 5. Page 1, line 9: I would recommend you delete "a safe." Radiofrequency treatment can cause some complications. 6. Page 1, the last sentence: I would recommend you delete the last sentence (due to... treatment). 7. I do not think the doses of pregabalin and gabapentin reached the maximum doses for both patients. Did the patients have any side-effects? If they did not have any side-effects, you need to state why you did not increase the doses of both drugs. 8. The horizontal axis of Fig. 1 is time after treatment. I would recommend you state actual times (days, weeks, months), instead of T2-5. 9. What and how much medication did the patients receive after repeated transcranial magnetic stimulation? It should be stated. 10. There are at least two important references on repeated transcranial magnetic stimulation for postherpetic neuralgia. You need to cite them for your manuscript. Pei Q, Wu B, Tang Y, et al: Repetitive transcranial magnetic stimulation at different Frequencies for postherpetic neuralgia: a double-bind,



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sham-controlled, randomized trial. Pain Physician 2019; 22: E303-E313. Pei Q, Zhuo Z, Jing B, et al: The effects of repetitive transcranial magnetic stimulation on the whole-brain functional network of postherpetic neuralgia patients. Medicine 2019; 98: e16105. 13. You should show important things of reference 4, instead of just stating "see discussions in Ref. 4. END



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Reviewer's code: 02445547 Position: Associate Editor

Academic degree: DNB, FEBS, FICS, FRCS (Gen Surg), MBBS, MNAMS

Professional title: Associate Professor, Director, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Singapore

Author's Country/Territory: China

Manuscript submission date: 2022-11-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-21 07:29

Reviewer performed review: 2022-12-21 07:51

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I read with interest the case report describing 2 patients who benefited at 3 months by rTMS therapy for post herpes neuralgic pain that was refractory to conventional modes of treatment. The authors have reported many pain scales and other relevant questionnaires and surveys and showed that this treatment works and results sustain at 3 months. I do not have any major criticism for authors. 1. Can please comment that this treatment can be considered in which other body pain conditions? For example can this treat post traumatic chest pain from rib fractures? or pain from ischaemic limb in gangrene patients? Pls discuss the wider implications 2. 3 months is not really long term. We all know that 1 year is probably the interval that is considered long term and thus please include this as a limitation. 3. What are the side effects of rTMS? What are the risks? How much does it cost? Is it widely available and common technology? Please tell these matters to readers 4. Any image of this technology or any graph or any data about how this is done and how we know that this is delivered or measured? Some information on this process of treatment by rTMS. Thanks