



**ESPS PEER-REVIEW REPORT**

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

**ESPS manuscript NO:** 18266

**Title:** Littoral cell angioma: A case report

**Reviewer's code:** 00722050

**Reviewer's country:** Canada

**Science editor:** Yue-Li Tian

**Date sent for review:** 2015-04-14 20:18

**Date reviewed:** 2015-04-14 22:52

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

**COMMENTS TO AUTHORS**

Littoral cell angioma of the spleen is a rare vascular tumour arising from the normal littoral cells lining the sinus channels of the red pulp. Although it is a primary benign neoplasm, newer published literature now re-classified LCA as having uncertain biological behaviour. A malignant transformation to littoral cell angiosarcoma is very rare, but has been reported/suggested. An association with other malignancies has been reported. Tall endothelial cells with histiocytic properties detaching into the vascular lumen are commonly seen. IHC staining reveals expression of both endothelial (factor VIII Ag and CD 31/BMA 120) and histiocytic antigens (CD 68/KP 1 and lysozyme). Typically, the immunohistochemical pattern of the LCA is as follows: CD31, CD68, CD163, CD21, FVIII antigen positive; CD34, CD8 negative. CD34 is usually negative!!! Reporting LCA may be interesting, but new advances may be necessary to make the report interesting to the scientific community. Table is nice, but there are some other aspects that need to be added a table of the stem cell properties of the sinusoidal cells of the spleen and a table of the genetic aberrations seen in angiosarcoma that may be important for the malignant transformation of LCA. Three more immunohistochemical figures need to be added with negative controls and numerous grammar and



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misspellings need to be taken out. An important reference is J Gastrointest Surg (2012) 16:863-867.



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18266

**Title:** Littoral cell angioma: A case report

**Reviewer's code:** 00722239

**Reviewer's country:** Japan

**Science editor:** Yue-Li Tian

**Date sent for review:** 2015-04-14 20:18

**Date reviewed:** 2015-04-19 07:18

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

This is the well-written case report of Littoral cell angioma (LCA). Although many case reports of LCA are appeared by literature search and this case report adds no new knowledge or clinical implications, my opinion is that case reports of rare and typical cases are also match the concept of WJCC. I can agree the pathological diagnosis of LCA but only one pathological picture is not enough. I request the macroscopic picture of resected spleen (cut surface) and low power view of histological picture of HE stain.



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 18266

**Title:** Littoral cell angioma: A case report

**Reviewer's code:** 02446726

**Reviewer's country:** Germany

**Science editor:** Yue-Li Tian

**Date sent for review:** 2015-04-14 20:18

**Date reviewed:** 2015-05-12 18:30

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
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		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

The case report presents yet another case of LCA in a very typical clinical setting, which makes the case suitable for clinical education. However, it does not add any information beyond the already established clinical and or pathological findings - which limits the importance of its presentation. In 2015, this would be already the 2nd publication of a case with LCA. The reviewer suggests a little more discussion as to possible molecular alterations in LCA and also a more detailed discussion of the two "malignant cases of LCA" - were there any similarities between these two published cases and if so, were these features also seen in the presented case/ or were these missing - suggesting a benign outcome?