



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 40502

**Title:** Multimodal treatments of Rt. gastroepiploic arterial leiomyosarcoma with hepatic metastasis: A case report

**Reviewer’s code:** 02803865

**Reviewer’s country:** France

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-07-02

**Date reviewed:** 2018-07-03

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

The authors report a case of gastroepiploid artery leiomyosarcoma (with synchronous liver metastases) diagnosed in a patients with a history of renal cell carcinoma. The case is of interest. An extensive revision is required. Abstract: A minimum of informations on



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the case should be noted. A conclusion (1 sentence) should be included. Introduction  
The authors could focus on leiomyosarcomas in aged male patients. Case presentation  
The authors should add informations on the treatment of the renal cell carcinoma (as well as on the stage, presence of metastases). The authors could add informations on the relationships between the gastro-epiploid artery and the tumor: was the tumor adherent to the artery? how did they make the difference between adherence (on which length) to the artery and a primitive arterial tumor and vascular invasion/extension to the artery? Did they see transition zones between the tumor and arterial wall on microscopy? Please precise if at 53 months, the patient was alive or dead? Format requirements: uniform format for all references (page number format) Figures: Past tenses should be used for descriptions.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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**PEER-REVIEW REPORT**

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

**Manuscript NO:** 40502

**Title:** Multimodal treatments of Rt. gastroepiploic arterial leiomyosarcoma with hepatic metastasis: A case report

**Reviewer’s code:** 00736670

**Reviewer’s country:** Turkey

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-07-02

**Date reviewed:** 2018-07-03

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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**SPECIFIC COMMENTS TO AUTHORS**

Is patient curatively treated or still metastatic? What is progression at last follow up

**INITIAL REVIEW OF THE MANUSCRIPT**



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**PEER-REVIEW REPORT**

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

**Manuscript NO:** 40502

**Title:** Multimodal treatments of Rt. gastroepiploic arterial leiomyosarcoma with hepatic metastasis: A case report

**Reviewer’s code:** 02512347

**Reviewer’s country:** Saudi Arabia

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-07-02

**Date reviewed:** 2018-07-06

**Review time:** 3 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

An interesting case report of leiomyosarcoma of the gastroepiploic artery, but it was not presented very well. It could do with language polishing. The case is well illustrated and referenced, but the abstract does not reflect the case well. Also, the introduction and



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the case report itself are not well presented. I do not think this case is suitable for the WJG, but may be considered for a surgical/oncology journal.

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

**Manuscript NO:** 40502

**Title:** Multimodal treatments of Rt. gastroepiploic arterial leiomyosarcoma with hepatic metastasis: A case report

**Reviewer's code:** 01438831

**Reviewer's country:** Japan

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-07-02

**Date reviewed:** 2018-07-15

**Review time:** 12 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
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		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This is a very rare case report of gastroepiploic arterial leiomyosarcoma with hepatic metastasis. I am very interested in this case because I reported a somewhat similar case in this journal (WJG 2017; 23(9): 1725-1743). I agree with the conclusion of the author. I



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have some questions and comments as follows; 1. According to the extent of the previous rectal cancer, both tumor were suspected for liver metastases and peritoneal recurrence of rectal cancer. So I would like to know the stage of the rectal cancer. Besides, preoperative imaging of rectal cancer whether liver tumor existed or not should be described. 2. The author described location of hepatic mass was S8 at first, but later the author described that S4 segmentectomy were performed. Is that correct? 3. After the first operation, the author indicated the omental 3.0cm mass was aLMS and liver 5.0cm mass was metastatic aLMS. At that time, it might be difficult to decide which lesion was origin. 4. At the second and the third operation, the exact pathological diagnosis of the specimen were not described. 5. It is better to describe the regimen of TACE. 6. In the last phrase of the discussion, it seemed different conclusions are stated from the same reference (reference No.10). Is that correct?

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