



### PEER-REVIEW REPORT

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

**Manuscript NO:** 55482

**Title:** Multidisciplinary treatment of life-threatening hemoptysis and paraplegia of choriocarcinoma with pulmonary, hepatic and spinal metastases: A case report

**Reviewer's code:** 02728252

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Egypt

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-03-20

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-06-23 07:45

**Reviewer performed review:** 2020-06-24 11:21

**Review time:** 1 Day and 3 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

1. The title should be shortened and rephrased (avoid repetition) likely as multidisciplinary treatment of life-threatening hemoptysis and paraplegia of patient with pulmonary, hepatic and spinal metastatic choriocarcinoma: A Case Report 2. Why the author used an abbreviation likely as GTD, no value and should be deleted. 3. A summary table for the case is recommended to describe demographic data, physical laboratory and imaging data. 4. Figures with a high resolution for lung computed tomography and spinal magnetic resonance imaging are mandatory and it is preferable to use arrows for clarification.



## PEER-REVIEW REPORT

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

**Manuscript NO:** 55482

**Title:** Successful treatment of life-threatening hemoptysis and paraplegia by multidisciplinary treatment in patient with pulmonary, hepatic and spinal metastatic choriocarcinoma: A Case Report

**Reviewer's code:** 01467363

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Full Professor

**Reviewer's Country/Territory:** Slovenia

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-03-20

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-06-28 12:13

**Reviewer performed review:** 2020-07-06 05:17

**Review time:** 7 Days and 17 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	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

Title: accurately reflects the topic and contents of the paper. Short title: with the abbreviation "MDT in ..." does not define the content most precisely! Abstract: 169 words, structured, appropriate. Key words: 4 key words, define the content of the paper. Core tip: 50 words, is appropriate. Introduction: is informative, 122 words, the reader is acquainted with the known facts about choriocarcinoma and types of treatment, mainly chemotherapy followed by radiation or surgery, resulting in a cure rate approaching 90%. Case presentation: 807 words, informative, key data about the female patient are presented: chief clinical complaints (progressively increasing hemoptysis), history of present and past illness, physical examinations (distressed breathing, backache, loss of all sensations below the Th10 level, flaccid paraplegia), laboratory data (leukocytosis, increased levels of  $\beta$ -human chorionic gonadotropin ( $\beta$ -hCG) , results of imaging procedures (including Fig. 1. A-C, chest CT and spinal MRI, graphical representation of the serial  $\beta$ -hCG levels), further diagnostic work-up, final diagnosis, treatment (with a detailed record of treatment in Fig.1), outcome and follow-up. Discussion: 635 words, presented are different treatment options in choriocarcinoma, a rare malignant cancer, arising from germ cells. The fact that the primary tumor, usually located in the uterus or ovaries, has not been confirmed, is highlighted in the discussion, an explanation is also offered to the reader. In the discussion, the authors also point out the problem of effective treatment of liver and bone metastases. They conclude, that currently chemotherapy remains the only potentially curative therapy for choriocarcinoma, surgery and radiotherapy offers additional treatment modalities in certain cases. Conclusion: short, 105 words, the authors point out the presentation of the the first case of metastatic choriocarcinoma



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with pulmonary, hepatic, and spinal metastases of not known specific primary site. They also emphasize the favorable course of the disease with the combination of different treatment options used and individualized treatment. References: 10, contemporary, from the period 1986 (Gynecol Oncol) - 2018 (Cancer Manag Res and Int J Gynaecol Obstet), references are appropriate. Conflict of interest: the authors declared no conflict of interest. Informed consent statement: in Chinese! Opinion of the reviewer Congratulations to the authors, the contribution is very interesting, a rarity in the field of oncology. In the text are some typographical errors, I suggest to accept the manuscript after language corrections.