

## PEER-REVIEW REPORT

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

**Manuscript NO:** 54399

**Title:** Thoracoscopic resection of huge esophageal dedifferentiated liposarcoma: A case report

**Reviewer's code:** 03725004

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor, Surgeon

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

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

**Manuscript submission date:** 2020-01-26

**Reviewer chosen by:** Ruo-Yu Ma

**Reviewer accepted review:** 2020-02-21 15:41

**Reviewer performed review:** 2020-02-23 12:55

**Review time:** 1 Day and 21 Hours

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
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The article is very interesting. It underlines the important to know this rare disease. Authors analyses very well and synthetic the rarity of this case and they report it as the first known case totally treated with a thoracoscopic resection. Moreover this treatment it was performed for emergency due to patient's growing dyspnea. Imagines are very interesting. The description of the case and their critical analysis are very interesting. Authors underline that difficulty to achieve a safe clear margins, as known this type of surgery request an aggressive surgery with esophagectomy to achive safe clear margins on the histopatologic exams. Correctly they had proposed to patient the esophagectomy but patient refused, so they have proceded whit a strict follow-up. Therefore, this case is very interesting especially for the new approach, maybe it can be take into account in small well differentiated liposarcoma or peduncolated ones, but i think that is important to underline that this treatment should non be considered as the gold standard. I think it can be accepted.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication



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[ ] Plagiarism

[ Y ] No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 54399

**Title:** Thoracoscopic resection of huge esophageal dedifferentiated liposarcoma: A case report

**Reviewer's code:** 00066723

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2020-01-26

**Reviewer chosen by:** Ruoyu Ma

**Reviewer accepted review:** 2020-02-20 08:48

**Reviewer performed review:** 2020-02-26 11:32

**Review time:** 6 Days and 2 Hours

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**

This manuscript concerns a case-report and relates of the successful thoracoscopic resection of a dedifferentiated liposarcoma in the esophagus. The data are presented in a straightforward way. Major comments: 1. In the core tip and on page 5, line 2, it is stated that dedifferentiated liposarcomas are a low-malignancy tumor. This is not the case, the authors may be confusing the more benign well-differentiated liposarcoma (as it generally does not metastasize) with the dedifferentiated liposarcoma that has a propensity to metastasize. Please carefully check. 2. Page 4, start of the discussion section - When considering the prevalence of the different liposarcoma subtypes it is stated that dedifferentiated liposarcoma is the rarest subtype, this is not correct as the pleomorphic liposarcoma is considered the rarest subtype. Please check. Minor comments: 1. Page 3, line 1 - The header is misspelled, it now reads: Case prsentation but should be "Case Presentation" 2. Page 3, line 9 - The text reads 21.5 x 15.13 mm but the figure legend mentions 21.5 x 15.9 mm. Please check and correct. 3. Page 3, line 23 - Sentence is not clear "We gave up confirm complete resection..." Please rephrase. 4. Reference 1, give a more complete reference. Page 5, line 22- This sentence should read: "We could not completely resect...." Please correct.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No



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***BPG Search:***

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- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 54399

**Title:** Thoracoscopic resection of huge esophageal dedifferentiated liposarcoma: A case report

**Reviewer's code:** 01560504

**Position:** Editor-in-Chief

**Academic degree:** DNB, FACS, FRCS, MBBS, MD, MNAMS

**Professional title:** Professor, Surgical Oncologist

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

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

**Manuscript submission date:** 2020-01-26

**Reviewer chosen by:** Ruo-Yu Ma

**Reviewer accepted review:** 2020-02-23 08:44

**Reviewer performed review:** 2020-02-27 16:25

**Review time:** 4 Days and 7 Hours

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
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The authors have reported a rare case of esophageal liposarcoma. From the point of view of oncology, there are many unanswered questions? 1. Why the preoperative biopsy of the large mediastinal lesion was not done? It is evident from the preoperative imaging that a complete resection was not anticipated. Had the authors undertaken a preoperative biopsy and diagnosed dedifferentiated liposarcoma, a preoperative systemic chemotherapy would have been given with two aims - (1) to control systemic micrometastasis and (2) down stage the disease with a possibility of complete resection. 2. Was this case discussed in a multidisciplinary tumor board prior to surgery? 3. Considering the presence of high grade tumor and incomplete resection, what was the adjuvant treatment given?

## **INITIAL REVIEW OF THE MANUSCRIPT**

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### ***BPG Search:***

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- ☐ Plagiarism
- ☐ No