

# PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62930

Title: Rapid response to radiotherapy in unresectable adenoid cystic carcinoma of

trachea: A case report

Reviewer's code: 05260981 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Slovakia

Author's Country/Territory: China

Manuscript submission date: 2021-01-21

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-01-22 22:51

Reviewer performed review: 2021-01-24 17:35

**Review time:** 1 Day and 18 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

**Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com

https://www.wjgnet.com

## SPECIFIC COMMENTS TO AUTHORS

The case report is clinically interesting, adds an important information and is well Several pieces of important information must be clarified: - long term documented. toxicity is not mentioned. It would be of the particular interest as a dose constraint of cervical oesophagus was largerly exceeded. Any dysphagia? - potential oesophageal late complications after the tose prescribed must be mentioned in the text (similar to trachea dose limit), - acute and late toxicity must be graded, though retrospectively, use RTOG or CTC AE scale, - follow-up interval must be specified, - radiotherapy prescription must be described clearly in methods and in fig. 3, with explicit total dose assignement in terms of PTVs which may be marked in cGy or in Gy, making 76 Gy in total (current description states 60 + 10 + 16 Gy), - key words: add tracheal cancer. Some linguistic and terminology issues: - not arousing but arising, - extending caudally not below, -Glottis and Adenoid.. do not use capitals, - not two phase's but two phase, - in Conclusion: TACC with rapid response, ...patients...could survive.. - contradictory statement in Introduction: ...most tumors poorly respond...result in long periods of remission., - ... TACC which... - in Case report: ... and/or a fit of cough. What does it mean? - not aroused but arose: see elswhere in the text, - ...caudally not below, -Discussion: ...prolonged that is usually asymptomatic. Replace with prolonged and asymptomatic. - not pronounced but marked, - non surgery should be non-surgical management, - be careful of tenses elswhere use past tense, - total irradiated dosage: ..total dose of irradiation, - long-distance lesion: should be large volume lesion, - ...was dredged replace with a different term (freed?), ...fields lessened: were reduced, - minify ---minimize, - ...vertical invasion...longitudinal, - if patients with TACC are unresectable... patients have technically or medically inoperable tumors, - dosage..dose and fractionation - a dosage elsewhere replace with a dose, - In conclusion ... TACC with



a rapid response... - The statement Since not so few patients... should be re-pharesd to provide a proper message.



## PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

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Title: Rapid response to radiotherapy in unresectable adenoid cystic carcinoma of

trachea: A case report

Reviewer's code: 03390217 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2021-01-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-21 06:47

Reviewer performed review: 2021-01-27 11:33

**Review time:** 6 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] 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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous
statements	Conflicts-of-Interest: [ ] Yes [ Y] No



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## SPECIFIC COMMENTS TO AUTHORS

Rapid response to radiotherapy in unresectable adenoid cystic carcinoma of trachea: a case report is a well written and interesting paper showing an excellent response of the tumor to Radiation therapy. Clasicaly, this tumor is considered as "radio-resistent" so, this case shows that RT is a real option. I think it's worthy of publication in the Journal



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 62930

Title: Rapid response to radiotherapy in unresectable adenoid cystic carcinoma of

trachea: A case report

Reviewer's code: 05260981 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Slovakia

Author's Country/Territory: China

Manuscript submission date: 2021-01-21

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-03-03 18:05

Reviewer performed review: 2021-03-03 19:29

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] 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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No



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Thank you for corrections. I believe your paper provides comprehensive and consistent information. Please correct: in Treatment: The weights of the three posterior fields were reduced (lessen than the others), in Outcomes: After 5 years (of) from treatment, the patient (survivals) survives...