

## PEER-REVIEW REPORT

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

**Manuscript NO:** 68689

**Title:** Resection of bilateral occipital lobe lesions during a single operation as a treatment for bilateral occipital lobe epilepsy

**Reviewer's code:** 06109497

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-06-07

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-06-08 05:40

**Reviewer performed review:** 2021-06-16 11:11

**Review time:** 8 Days and 5 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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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**

The authors propose to replace the method of treatment (resection of bilateral lesions of the occipital lobe) with one operation instead of two operations. A single operation is an effective and safe treatment for bilateral occipital epilepsy. Using this approach will provide several advantages over conventional two-stage treatment, including a shorter treatment cycle, fewer surgeries/hospitalizations, and lower costs. But, the authors practically do not cite new references (for the last 5 years), only 5 out of 28 references refer to this interval. Thus, almost all references may be out of date, as significant progress has been made in the research and treatment of epilepsy in recent years. I propose the authors to revise the article to include references to the latest advances in the field of study.