

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 68711

Title: Pulmonary Langerhans cell histiocytosis and multiple system involvement: A case

report

Reviewer's code: 03348764

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2021-06-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-23 17:49

Reviewer performed review: 2021-07-01 15:10

Review time: 7 Days and 21 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



SPECIFIC COMMENTS TO AUTHORS

REVISION AND CRITERIA CHECK LIST FOR MANUSCRIPT No 68711 The authors of the manuscript under revision present us a rare case of a male middle-aged man with Langerhans Histiocytocis with multi-systemic involvement 1. The title reflects the main point of the case report 2. The abstract should emphasize the fact that the condition rarely appears in a middle -aged non smoker persons 3. There appear NO keywords in the manuscript and they should be added 4. In page 2 (case presentation section) the authors state that on CT there are "adenocarcinoma nodules". Do they mean that this was a presumptive radiological diagnosis? If yes please rephrase 5. In page 7 the authors state that lung diffusion function was normal, which is rather odd. It would be interesting to make a comment in the discussion session e.g lung parenchymatic disease was diagnosed on an early stage?? 6. Please check that the units in Table 1 meet the SI units requirements. Maybe the normal values for the hormones should also be provided. Names of abbreviated words should be provided on the table as well 7. It would be nice and interesting to add some information regarding the therapeutic intervention to this patient 8. The whole manuscript needs thorough revision in terms of language preparation because some phrases are incomprehensible, e.g. In the conclusion session the phrase "has no effect on anti-infection" makes no sense to me.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2021-06-01

Reviewer chosen by: Yun-Xiaojian Wu

Reviewer accepted review: 2021-08-03 15:40

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Review time: 1 Hour

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 [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



SPECIFIC COMMENTS TO AUTHORS

The case is interesting and the presentation is rare. The authors need to address some

spelling issues

SECOND REVISION FOR MANUSCRIPT No 68711

Dear Editor,

The authors have addressed most of the issues raised by the first revision. Please allow me to add a few more remarks

- 1. Many words are written as one without a space in between. Please notice the word spelling
- 2. In the second paragraph of the Discussion section, the authors state that "Approximately ...have *diffusive dysfunction*, restrictive ventilatory dysfunction in the

early stage of the disease, and obstructive ventilatory dysfunction in disease progression [7]."

Diffusive dysfunction could be better described as disorder in lung diffusion capacity for carbon monoxide.

3. The authors have added a timeline table which to my opinion does not add much to the manuscript, since all main elements of the table are also described in the main manuscript