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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 14292
Title: Cutaneous metastasis of cholangiocarcinoma
Reviewer code: 02545518
Science editor: Su-Xin Gou
Date sent for review: 2014-09-30 07:35
Date reviewed: 2014-10-01 03:16

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Existing	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] No records	
[ ] Grade D: Fair	[ ] Grade D: Rejected	BPG Search:	[ ] Rejection
[ ] Grade E: Poor		[ ] Existing	[Y] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

This is a comprehensive manuscript with fine structure as well as very interesting because for first time analyses clinical data and survival of many cases of cutaneous metastasis of cholangiocarcinoma, a really rare manifestation of this disease. Authors made an excellent bibliography research and it is really impressive that in 27,59% of the cases skin metastasis was the first sign of cholangiocarcinoma. Minor comments: 1) Median but not mean of the Age in Table 1 and Results, has to be calculated, because the cases are almost 30 and because authors use Range of Age. 2) Authors mention that skin metastasis in 50% of the cases was in the drainage region namely previous percutaneous biliary drainage or catheterization site. It would be useful to mention that hepatocellular carcinoma (HCC) has also been related to cutaneous metastasis in the site of biopsy.

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Existing	[ ] High priority for publication
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] No records	
[ ] Grade D: Fair	[ ] Grade D: Rejected	BPG Search:	[ ] Rejection
[ ] Grade E: Poor		[ ] Existing	[ ] Minor revision
		[ ] No records	[Y] Major revision

COMMENTS TO AUTHORS

The manuscript entitled "Cutaneous metastasis of cholangiocarcinoma" has collected the rare manifestation of this cancer to the skin and tried to display the overall survival based on the skin metastatic characters. I still have some issues that the authors should address to support the findings 1. The main prognosis of cholangiocarcinoma is still relied on the tumor staging, although all the cases should be called as distant metastasis, the authors should display the staging of the tumor at local site in term of tumor size, regional lymph node involvement, etc. 2. There are many appearance of skin findings of this metastatic tumor. Have the authors tried to characterize those? Would it be meaningful to compare the size of metastasis and the overall survival? Perhaps some example of figures would be helpful for the readers since this is a very rare entity. 3. Where those single metastases located? At the PTBD site or distant area? This is helpful to figure why this became significant. The authors should try to explain with a hypothesis. 4. Any palliative chemotherapies or radiation treatments were given to any of these patients? Since the overall survival might be altered because of this factor.

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Existing	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] No records	[Y] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	BPG Search:	[ ] Minor revision
[Y] Grade E: Poor		[ ] Existing	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

The manuscript entitled, "Cutaneous metastasis of cholangiocarcinoma" by Liu M et al., performed the literature review regarding the cutaneous metastasis originating from cholangiocarcinoma. I have some comments. Comments 1. First of all, the way of case collecting could not be validated. Authors included cases of drainage catheter tract recurrence. While they found 15 cases in their survey, Takahashi et al. from Nagoya group had already reported their institutional 23 consecutive cases of this type recurrence (Br J Surg 2010;97:1860-6). Similarly, other authors of high-volume center have experienced not a few cases of drainage catheter tract recurrence, and I do not think that the authors caught up with all the cases. Collecting only cases reported as a rare case report could never represent the real entity of the cutaneous metastasis of cholangiocarcinoma. Consequently, I am afraid that the results of the present review may not help the clinical practice for the advanced cholangiocarcinoma. 2. Authors mentioned that the incidence of scalp metastasis was most frequent in skin metastasis and that bile duct cancer should be suspected when one noticed scalp nodules. I think that skin metastases from breast cancer, lung cancer, and gastric cancer are far more frequent than those from cholangiocarcinoma, and that those presented initially with skin metastasis should be screened for any possible primary diseases including cholangiocarcinoma.

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Existing	[ ] High priority for publication
[ ] Grade C: Good	[Y] Grade C: A great deal of language polishing	[ ] No records	
[Y] Grade D: Fair		BPG Search:	[ ] Rejection
[ ] Grade E: Poor	[ ] Grade D: Rejected	[ ] Existing	[ ] Minor revision
		[ ] No records	[Y] Major revision

COMMENTS TO AUTHORS

Liu M et al. performed the literature review regarding the cutaneous metastasis of cholangiocarcinoma. Idea of analyzing cutaneous metastasis of cholangiocarcinoma is wonderful. However, there are a lot more to be done to be published. Major comments: First of all, your English should be more brushed up. Next, to write down which decimal places are not consistent throughout the manuscript. Third, since there only 30 cases, how about listing up all cases for clinical features and make a table. Did patients receive chemotherapy? Treatments would affect survival. Minor comments: 1. Page 2, line 10: The authors should replace "58.87 years" by "58.9 years". 2. Page 2, line 11-: Change all percentages to first decimal place including tables. e.g. 27.59%→27.6%. 3. Page 3, line 5-7, Lung and breast cancer……female, respectively. This was more of written in reference of "reference 1", so referring "reference 1" is incorrect. 4. Page 3, line 7-8, The early……timely intervention: What kind of intervention? Or, was it meaning "The early recognition of skin metastasis of cancers previously not diagnosed is critical for timely intervention". 5. Page 3, line 22: The authors should replace replace "cutaneous metastasis occurred time" by "time cutaneous metastasis occurred". 6. Page 3, line 23, number of cutaneous metastasis: At what time? At the time of diagnosis or throughout life? 7. Page 3, line 25: "and" is missing in front of "immunohistochemical". 8. Page 3, line 26: OSCM This word is first time described in the manuscript. 9. Page 3, line 26, OSCM: Why was survival analyzed by OSCM? Overall survival after the initial diagnosis of cholangiocarcinoma seems also interesting. 10. Page 4, line 7, As Tab 1

showed: Why is "Table" abbreviated? Same thing for Page 5, line 13. "Tables" are for better understanding of the result, to say, result section is not a legend of "Tables". Same thing for Page 5, line 18, Page 6, line 4 and Page 6, line 8. "As shown in Table 1" is correct. 11. Page 4, line 9, Interesting: Subjective opinion is not needed in the result section. 12. Page 4, line 11: The authors should replace "the mean time of development of……" by "the mean time of developing cutaneous……" or "the mean time for cutaneous metastasis development……". 13. Page 4, Title of Table 1: It is better to put "patients with" in front of cutaneous. 14. Page 4, Table 1: "Spaces" are missing between words and parenthesis. Same thing for "Figure 1 and 2". 15. Page 4, Table 1: M:F=3.29, M to F ratio is 3.29, but M:F=23:7. More to say, unnecessary. 16. Page 4, Table 1: The authors should replace "Cutaneous metastasis occurred time" by "Cutaneous metastasis occurrence". Also make another item such as "Unknown" or "Not available" so that the "n" becomes 30. 17. Page 4, Table 1: The authors should replace "Site of first cutaneous metastasis" by "Site of "initial" cutaneous metastasis". 18. Page 4, Table 1: Put "spaces" in front of "Scalp", "Head", "Shoulder", and "Chest". 19. Page 4, Table 1: Are "scalp", "head", and "skin behind left ear" or even "face" clinically different? Also are "chest", "trunk" and "back" so different? 20. Page 4, Table 1: Why not write down all the initial cutaneous metastasis sites and say some are overlapped? 21. Page 5, line 8: "Only" is not necessary. 22. Page 5, line 18, As Fig 1 showed,……: "median OSCM" is not described in Figure 1. 23. Page 5, line 18: "Only" is not necessary. 24. Page 6, line 4, predicted: Male and single metastasis were "associated" with poorer OSCM, but do not "predict" survival. 25. Page 6, line 10: The authors should replace "4 months: 3 months" by "4 months versus 3 months". 26. Page 6, line 13: The authors should replace "strong" with "significant. 27. Page 6, Fig 2: The authors should replace "multiple/single" by "multiple metastases/single metastasis". The authors should also replace "≧60/<60" by "

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
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[ ] Grade D: Fair	[ ] Grade D: Rejected	BPG Search:	[ ] Rejection
[ ] Grade E: Poor		[ ] Existing	[Y] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Dr. Liu et al., report on cases of cholangiocarcinoma that are available in the literature, providing an interesting and relevant synthesis of the available data. In 23 published reports, 30 patients with cutaneous metastases of cholangiocarcinoma were identified. They report the age, sex, overall survival, and site of metastases. Overall this manuscript is easy to read and well presented. Minor suggestions: 1. Because the authors have used published cases, it is difficult to know if these cases are typical or suffer from reporting bias. The authors should note the limitation that only published cases could be included and characteristics of unpublished cases (sex ratio, OSCM, site of metastasis) may not be representative. Additionally, I suggest the authors change the abstract 'Aim' sentence to include "of published cases" at the end. 2. The authors note the potentially unexpected observation that patients with a single skin met had a shorter survival than those with multiple mets. This may be explained by the need for percutaneous biliary drainage. How many of the patients with a single met had a lesion at the drainage site? Of the patients with a distant skin metastasis, how many had multiple mets and how many had a metastasis-free PBD? It is possible that the patients with more advanced primary tumors were more likely to have PBD and thus more likely to have a single skin met. 3. It would be helpful to include figure legends.