

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Oncology*

**Manuscript NO:** 79536

**Title:** Edema of limbs as the primary symptom of gastric signet-ring cell carcinoma: A case report and literature review

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06254416

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Assistant Professor, Attending Doctor

**Reviewer's Country/Territory:** United States

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

**Manuscript submission date:** 2022-08-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-08-27 20:42

**Reviewer performed review:** 2022-08-27 21:06

**Review time:** 1 Hour

Scientific quality	<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 Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" 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

Page 2 Lines 32/33: the second half of this sentence is unclear. Line 35: is there a better word than permeation Lines 46-47: I feel this is an aggressive statement. I think the case highlights the importance of physical exam as it may localize the etiology of the edema. However, 99% of extremity edema is not gastric cancer, so excluding it is not high yield. Page 3 Lines 63-65: this highlights the change recommended above Page 4 Lines 91 “underwent” may read better as “developed” Line 92 “reason” may be better as “known cause” Line 93 insufficiency is the correct spelling. It is correctly spelled in line 94 Page 5 Line 112 does “depressed edema” mean “pitting edema?” Line 113 “seemed normal” is quite informal Line 121 appears to have an unnecessary tab/space Page 6 Line 141: should remove the period after SRCC and remove the capital in Gastrointestinal as these two sentences need to be combined to be a complete sentence Line 147: add a space before Taken Lines 158-159: “the patient also takes” would read better as “the patient underwent” Page 7 Line 171-172: could be reworded to the complaint of edema worsened Line 174-175: rather than “gave up” this could be reworded to “declined” and then “began receiving palliative diuretic therapy” Page 8 Lines 203 and 204: remove the parentheses and just quote the terms searched Line 205: “literatures” is not the proper word. Consider manuscripts instead.

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**Reviewer's code:** 05098925

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor, Doctor, Lecturer, Staff Physician

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

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

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Scientific quality	<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
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Conclusion	<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
Re-review	<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

Edema of limbs as the primary symptom of gastric signet-ring cell carcinoma: A rare case report and literature review The authors reported the very interesting case of gastric signet ring cell carcinoma who presenting with lymphedema of limbs and subcutaneous metastasis. The authors should be commended on their work. There are a few areas where additional information would enhance the manuscript. 1. Introduction of this manuscript is redundant, please rewrite it more concisely. 2. In “case presentation” part, author mentioned that patients firstly presented with cutaneous edema. To enhance the readiness, please provide the information whether it is “pitting” or “non-pitting edema”. 3. In “Imaging examination” part, author described that “No pathological FDG uptake was detected in the liver, spleen, kidneys, gastrointestinal system, and both in the abdominal and pelvic lymph node groups”, but this patient was diagnosed as gastric carcinoma by pathology”. Please provide the reason why the FDG uptake was normal in patient with intra-abdominal malignant lesion like this patient. 4. This patient had hypoalbuminemia, hyperglobulinemia, and lymphopenia (at the all-time of follow up), which consistent with triad of chyle leaks. And most common etiology of chyle leak is lymphatic obstruction. Does the author agree with this possibility. If yes, this triad resulted from cutaneous metastasis or not? And can it occur when no evidence of chyle leak from the body like this patient. 5. At the 12-months visit, patient developed poly serous ascites. Is it chylous ascites? And it would be more impressive if author demonstrate the picture of imaging and fluid aspiration of the patient. 6. On lines 200, please provide the citation. 7. In conclusion, author stated that “Thus, a careful clinical intraoral examination must be performed on patients...”. Why author suggest physician

to proceed intraoral examination while this patient had intragastric malignant lesion. 8. Although the language of this manuscript seem good, the content flow need to be improved.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor, Doctor, Lecturer, Staff Physician

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

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

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**Reviewer chosen by:** Xiao-Fang Liu

**Reviewer accepted review:** 2022-09-19 14:30

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**Review time:** 1 Day and 21 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
<https://www.wjgnet.com>

<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**

none