

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

ESPS manuscript NO: 10251

Title: Lymphoepithelioma-like carcinoma of the Breast Presenting as Breast Abscess: A Case Report and Literature Review

Reviewer code: 00723142

Science editor: Xiu-Xia Song

Date sent for review: 2014-03-24 14:29

Date reviewed: 2014-05-10 03:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

1. I think it is a rare case where features and pathology overlap between abscess, lymphoma and carcinoma (More like a NPC) 2. How most of the reported cases treated (Chemotherapy protocol) 3. In view of long period of discharge and drainage, don't you think that a mastectomy with avoidance of radiotherapy is a better justifiable option? 4. Do you think that there is a room to treat these cases as NPC or Lymphoma? 5. How long the post operative wound discharge continued and how it was managed?

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Reviewer code: 00051397

Science editor: Xiu-Xia Song

Date sent for review: 2014-03-24 14:29

Date reviewed: 2014-05-12 03:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The paper is going to be accepted provided that my recommendations will be fulfilled.

These are my comments for the authors:

For an accurate histological diagnosis

1) the results for Cytokeratin 5/6 and Cytokeratin 7 should be presented

2) kappa and lambda light chains in lymphocytes should be estimated in order to exclude a non-clonal lymphocytic infiltrate.