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ESPS Peer-review Report

Name of Journal: World Journal of Experimental Medicine

Ms: 3152

Title: Steroid resistance in leukemia

Reviewer code: 00069481

Science editor: h.h.zhai@wjgnet.com

Date sent for review: 2013-04-11 21:06

Date reviewed: 2013-05-11 14:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input 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	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS

COMMENTS TO AUTHORS:

This manuscript is well conducted and it helps to understand the mechanisms of steroid-resistance in acute lymphoblastic leukemia patients. The quality of the work described is adequate to accept in the current format.

ESPS Peer-review Report

Name of Journal: World Journal of Experimental Medicine

Ms: 3152

Title: Steroid resistance in leukemia

Reviewer code: 00204324

Science editor: h.h.zhai@wjgnet.com

Date sent for review: 2013-04-11 21:06

Date reviewed: 2013-05-12 00:39

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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS

COMMENTS TO AUTHORS:

This is an interesting manuscript. However, because glucocorticoids are mainly effective on lymphocytic lineage and because chronic lymphocytic leukemia is not a very progressive disease but appears closer to low grade non Hodgkin lymphomas, it seems that the review should only focussed on acute lymphoblastic leukemia. The initial part describing AML and CML does not seem useful. The authors can also discuss the prognostic impact on prognosis of initial response to steroid treatment.

ESPS Peer-review Report

Name of Journal: World Journal of Experimental Medicine

Ms: 3152

Title: Steroid resistance in leukemia

Reviewer code: 00068253

Science editor: h.h.zhai@wjgnet.com

Date sent for review: 2013-04-11 21:06

Date reviewed: 2013-05-17 22:08

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"/> Existed	<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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

The review deals with the action of steroids on leukemic cells and the biology of the resistance of these cells to steroids. It is a well written and updated paper on an old-known topic. It mainly refers to data published after 2000, although the beneficial effects of steroids in leukemia are rather known for a long time. The paper discusses the potential action of steroids in several main types of leukemia, namely chronic lymphocytic, chronic myeloid, acute lymphoblastic and acute myeloid. It should be mentioned that this classification is a rather empirical one and suitable for the non-specialist rather, as opposed to the modern WHO classification of leukemias or even to the older classic FAB system. Nevertheless, it covers every category of leukemia quite enough, from the clinical, pharmacological, cellular and molecular point of view. The crucial role of glucocorticoid receptor (GR) in its two isoforms -a and -b, acting antagonistically, is completely undersoood. It covers the topic of steroid resistance, and the two alternative options of resistance, i.e. primary and secondary. It also covers the divergent mechanisms of resistance to T and B-blast cells. It also touches the heritability of resistance, characterized by generalized end-organ unresponsiveness to steroids, a major problem faced by the clinicians. It would be of interest if the concept of inherited steroid resistance was also applicable in other cases necessitating steroids in large doses like thrombocytopenic purpura or autoimmune hemolytic anemias. Resistance may be an important reason for avoiding administration of steroids in analogous cases. The important role of steroids in many forms of acute leukemia treatment, deserves a better understanding by the clinician. Thus, this part of the manuscript should be re-written more explicitly. This may target to designing more specific therapies in leukemias.