

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 78956

Title: POEMS syndrome with ascites as an early-stage manifestation: a case report and literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04213276

Position: Peer Reviewer

Academic degree: MD, MSc

Professional title: Doctor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2022-09-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-04 16:40

Reviewer performed review: 2022-10-07 17:45

Review time: 3 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input 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 Grade E: Do not publish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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	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

This is a nice paper highlighting a rare disease by reporting a highly researched case. There are some issues with grammar and vocabulary that need to be fixed. Apart from that, it would be appropriate for the authors to explain exactly which criteria were met and how each criterion was met in order to reach the final diagnosis (in the final diagnosis section).

Reply: The grammar and vocabulary of this article have been further revised and polished by professional native speakers. The certificate of non-English speaking countries has been issued. In the final diagnosis, I found that the patient met the specific diagnostic criteria: polyneuropathy existed, monoclonal plasma cell was abnormal, VEGF concentration significantly increased, hepatomegaly existed, extravascular volume overloaded, and prolactin increased.

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Title: POEMS syndrome with ascites as an early-stage manifestation: a case report and literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02951945

Position: Editorial Board

Academic degree: MD

Professional title: Assistant Professor, Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-09-06

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-10-12 22:07

Reviewer performed review: 2022-10-12 22:21

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

Very interesting case report. I have few comments- 1) It will be helpful to the readers to focus on case history if it is shortened and you describe only relevant findings. Whole case presentation can be included in 3 or 4 paragraphs. there is no need for separate paragraphs for personal history and other minor details. I recommend authors to review case reports in ACG journal and rewrite this manuscript. 2) Kpa in fibroscan was 21, does the patient have cirrhosis, do we have any records of upper gastrointestinal endoscopy or liver biopsy. I assume increased liver stiffness is from right heart overload/failure. 3) Did you measure serum ascites albumin gradient, this is important in evaluation of ascites 4. Many acronyms like PPD, CT, PET need to be explained at the first instance where you refer to them 5. I suggest that the discussion and conclusion also made precise

Comment 1: It will be helpful to the readers to focus on case history if it is shortened and you describe only relevant findings. Whole case presentation can be included in 3 or 4 paragraphs. there is no need for separate paragraphs for personal history and other minor details. I recommend authors to review case reports in ACG journal and rewrite this manuscript.

Reply: POEMS is a rare disease, especially ascites as the primary manifestation. We need to exclude other diseases that cause ascites and hence we listed several medical histories and related examinations, but we have deleted irrelevant ones. Regarding the format, we have written in sections at the request of the WJCC journal.

Comment 2: Kpa in fibroscan was 21, does the patient have cirrhosis, do we have any records of upper gastrointestinal endoscopy or liver biopsy. I assume increased liver stiffness is from right heart overload/failure. As you assume, the patient continued to have a significant increase in BNP and the right heart failed, so the liver stiffness value increased.

Reply: The patient's liver fibre index was elevated, and the results of gastroscopy and liver biopsy were added to the present history as required to prove that the patient did not have

cirrhosis.

Comment 3: Did you measure serum ascites albumin gradient, this is important in evaluation of ascites .

Reply: We have added serum ascites protein gradient as required, suggesting that it is an exudate.

Comment 4: Many acronyms like PPD, CT, PET need to be explained at the first instance where you refer to them.

Reply: The full name of PET and PPD are used when they first show in the article.

Comment 5: I suggest that the discussion and conclusion also made precise.

Reply: The Discussion and conclusion sections have also been revised to specify that the patient has the diagnostic criteria of polyneuropathy, monoclonal plasma cell abnormalities, significantly increased VEGF concentration, hepatomegaly, extravascular volume overload, and elevated prolactin.