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**Manuscript NO:** 80679  

**Title:** Blood typing and transfusion therapy in a patient with Y subtype acute myeloid leukemia M2: A case report  

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

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

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<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ ] Grade B: Very good</th>
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<td>Novelty of this manuscript</td>
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SPECIFIC COMMENTS TO AUTHORS
General comment Overall, it is clear that the different sections of the article are well aligned, with the introduction setting the stage for the case study presented and the discussion and conclusion building on this to provide a comprehensive overview of the importance of accurate blood typing in the treatment of ABO subtype AML-M2. Overall, including more information and context in these sections would help to provide a clearer and more comprehensive understanding of the case study presented and the importance of accurate blood typing in the treatment of ABO subtype AML-M2. Including more specific details and examples in these sections would help to make the article more informative and would provide a more in-depth understanding of the case study presented. Include other documents if applicable-statistical analysis certificate, IRB etc
Abstract The abstract of this article could be improved by including a clearer summary of the main findings and conclusions of the case study. Currently, the abstract briefly mentions that the patient received blood transfusion therapy and that there were difficulties in accurately identifying their blood type, but does not provide any specific information on the outcome of the treatment or the lessons learned. Background
Additionally, including more background information on ABO subtype AML-M2 and the challenges that can arise in its treatment would be helpful in providing context for the case study presented. This could include information on the prevalence of this subtype, the typical treatment approaches used, and any common complications or challenges that may arise. Method To further improve the method/case presentation section, it would also be helpful to include more information on the patient's overall treatment plan and any other therapies that were administered in addition to blood transfusion therapy. This would provide a more comprehensive understanding of the patient's treatment and would allow the reader to see how the blood transfusion therapy fit into the overall treatment plan. In the method/case presentation section, it would be helpful to include more details on the specific methods used to identify the patient's blood type, such as the serological or genotyping techniques employed. This would provide more context for the difficulties encountered in accurately identifying the blood type and would help the reader to better understand the challenges faced in the case study. Results In the results section, it would also be helpful to include more information on the specific blood typing techniques used and the results obtained. For example, if genotyping was used, it would be helpful to provide more details on this method and the specific results obtained. Additionally, including more information on the patient's overall response to the blood transfusion therapy and any changes in their clinical status would provide a more complete picture of the outcomes of the treatment. In the results section, it would be helpful to provide more information on the specific outcomes of the blood transfusion therapy, including any complications or adverse reactions that occurred. This would help to illustrate the importance of accurate blood typing in the treatment of this patient and would provide more concrete examples to support the conclusions drawn in the discussion and conclusion sections. Discussion Overall, the discussion in this article provides a thorough overview of the importance of accurate
blood typing in the treatment of patients with AML-M2, particularly in regards to the A1 and A2 subtypes. It is clear that the use of traditional serological methods to identify ABO subtypes can lead to missed tests or misdetermination, and that genotyping is a more accurate but costly method. The article also highlights the potential risks and complications that can arise if the wrong blood type is transfused, such as fever, chills, and even death in severe cases. One potential improvement for the discussion section could be to provide more context on the prevalence of ABO subtype AML-M2 and how common it is for patients to experience difficulties with blood transfusion therapy. This could help to contextualize the importance of accurate blood typing in the treatment of this subtype of AML. Conclusion In the conclusion, the article highlights the importance of accurately identifying blood types, particularly in the case of ABO subtype AML-M2, to ensure the efficacy and safety of blood transfusion therapy. However, the conclusion could be strengthened by including a summary of the main points discussed in the article and how they relate to the case study presented. Additionally, the conclusion could explore potential future directions for research in this area, such as the potential for genotyping to become more widely available or the development of alternative treatment strategies for patients with ABO subtype AML-M2.
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SPECIFIC COMMENTS TO AUTHORS
Please accept and publish.