PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66914

Title: Monomorphic epitheliotropic intestinal T-cell lymphoma presenting as melena with long-term survival: A case report and review of literature

Reviewer’s code: 05429607

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor

Reviewer’s Country/Territory: Lithuania

Author’s Country/Territory: Japan

Manuscript submission date: 2021-04-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-09 20:56

Reviewer performed review: 2021-04-19 21:05

Review time: 10 Days

Scientific quality

[ ] Grade A: Excellent [ Y] Grade B: Very good [ ] Grade C: Good
[ ] Grade D: Fair [ ] Grade E: Do not publish

Language quality

[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing
[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection

Conclusion

[ ] Accept (High priority) [ Y] Accept (General priority)
[ ] Minor revision [ ] Major revision [ ] Rejection

Re-review

[ Y] Yes [ ] No

Peer-reviewer statements

Peer-Review: [ Y] Anonymous [ ] Onymous
Conflicts-of-Interest: [ ] Yes [ Y] No
SPECIFIC COMMENTS TO AUTHORS

Dear Authors, First of all, thank you for submitting your manuscript to the World Journal of Gastroenterology. This is a rare, interesting, well-written and illustrated case report that deserves to be published. It discusses a rare manifestation of the MEITL with gastrointestinal bleeding and emphasizes the importance of early diagnostics and treatment. The literature search of similar cases is also established. However, the case report could be improved with some corrections. • What was the first instrumental examination you performed: EGD or CT? According to the abstract, it looks like EGDS, however the case presentation part Imaging examinations you started with CT. • Please provide the abbreviation’s explanation under table 1 and the normal ranges of your laboratory. Minor language polishing needed: several commas and articles missing.