



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 44761

**Title:** Bilateral Adrenocortical Adenomas Causing ACTH-independent Cushing’s syndrome: A Case Report and Literature Review

**Reviewer’s code:** 02440467

**Reviewer’s country:** Italy

**Science editor:** Ying Dou

**Date sent for review:** 2019-01-12

**Date reviewed:** 2019-01-22

**Review time:** 9 Hours, 10 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

Dear Editor thank you for inviting me to review this article entitled “Bilateral adrenocortical adenomas causing ACTH-independent Cushing’s syndrome: A case report and literature review”. The paper is well written and well documented and is a



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matter of clinical interest; I only have some minor remarks. There is a total lack of clear indications about all the acronyms and abbreviations such as: OGTT (oral glucose tolerance test) showed IGT (impaired glucose tolerance) AVS (adrenal vein sampling), BAAs (Bilateral adrenocortical adenomas), PPNAD (bilateral primary pigmented nodular adrenocortical disease: all acronyms and abbreviations should be spelled out the first time they are used. May be there is one small typo: "Then we did Bilateral AVS to see if both of the adenomas are (past tense, "were" could be better in accord with "did") cortisol-secreting adenoma". The statement "The first case of BAAs in China was diagnosed by our team" please change "diagnosed" with "reported in medical literature", since you cannot be sure that in China it was the first case diagnosed but for sure it was the first one that was reported. In the title you refer to "literature review": as a matter of fact, there is no a real literature review in your paper. You give only minimal citations and references. I did not found any mention about the very rare risk of vein rupture, or hematoma during AVS sampling or other opinions from different experiences about surgical treatment (Two-step bilateral adrenalectomy, partial adrenalectomy). For this reason, I will suggest to delete in the title "and literature review".

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- [ ] The same title
- [ ] Duplicate publication
- [ ] Plagiarism
- [ Y ] No

##### ***BPG Search:***



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- No



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 44761

**Title:** Bilateral Adrenocortical Adenomas Causing ACTH-independent Cushing’s syndrome: A Case Report and Literature Review

**Reviewer’s code:** 00559125

**Reviewer’s country:** France

**Science editor:** Ying Dou

**Date sent for review:** 2019-01-21

**Date reviewed:** 2019-01-25

**Review time:** 10 Hours, 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This is an interesting case report of a 31 yo woman with bilateral adrenocortical adenomas, a rare cause of Cushing's disease. The authors highlight the importance of adrenal venous sampling for diagnosis and two-step surgery for treatment.



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Suggestions for manuscript improvement: - a low magnification image of a H&E stained section for each removed adrenal should be shown to appreciate the macroscopic features of the bilateral adenomas; - Weiss score for each tumor should be reported to exclude the possibility of a carcinoma; - positivity for adrenal markers and Ki-67 should also be reported for the right side tumor.

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