PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 71764

Title: A case of pembrolizumab-induced Stevens-Johnson syndrome in advanced squamous cell carcinoma of the lung

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05449007

Position: Peer Reviewer

Academic degree: MBBS, MD

Professional title: Academic Fellow, Doctor

Reviewer’s Country/Territory: United States

Author’s Country/Territory: China

Manuscript submission date: 2021-10-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-18 17:04

Reviewer performed review: 2021-10-18 17:14

Review time: 1 Hour

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<th>[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] Grade D: Fair [ ] Grade E: Do not publish</th>
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<td>Language quality</td>
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<td>Conclusion</td>
<td>[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection</td>
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<td>Re-review</td>
<td>[ ] Yes [Y] No</td>
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SPECIFIC COMMENTS TO AUTHORS
The authors describe a case of Steven-Johnson Syndrome as a complication of immune-checkpoint inhibitor (Pembrolizumab) in squamous cell carcinoma patient. While the case is interesting, below are my recommendations on reviewing this manuscript: 1. The grammar needs significant editing as there are several deficiencies in writing format. It needs to also be written in scientific format rather than casual. 2. While an expert consultation with Dermatology had yielded a clinical diagnosis of SJS, it is entirely unclear what led them to the diagnosis. Was there mucosal involvement? Was there a skin biopsy? It is unclear as simply severe skin rash as an adverse effect of Pembrolizumab is a known and common complication and it is important to highlight how you distinguished between the two in this case.
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Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03887097

Position: Editorial Board

Academic degree: MBBS, MSc

Professional title: Doctor

Reviewer’s Country/Territory: Singapore

Author’s Country/Territory: China

Manuscript submission date: 2021-10-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-24 04:11

Reviewer performed review: 2021-10-24 10:19

Review time: 6 Hours

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| Re-review          | [ Y] Yes                     | [ ] No                        |
SPECIFIC COMMENTS TO AUTHORS
This case report is relatively straightforward, however, there is a paucity of takeaways from this single case report. Specific comments: 1. Please avoid "... and so on" in scientific writing. 2. Does the patient have any known drug allergies? Taking any traditional Chinese medicines or herbal supplements? 3. What about documented Nikolsky’s sign or Koebner phenomenon? 4. What was the SCORTEN scoring for this patient? 5. Please provide the relevant biochemical results (and reference ranges) in a table format. 6. Apart from corticosteroids, there is actually good (and perhaps better) emerging evidence to support the use of cyclosporine in SJS/TEN (citation: ncbi.nlm.nih.gov/pmc/articles/PMC5880515). The results of these studies suggest that the administration of cyclosporine 3 to 5 mg/kg per day as early as possible in SJS/TEN may be beneficial. This should be at least briefly mentioned. 7. Please rephrase "Through our medical records and relevant treatment schemes, we can provide a little treatment basis for clinical treatment." 8. Please suggest some concrete recommendations and areas for future research.
Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 71764

Title: A case of pembrolizumab-induced Stevens-Johnson syndrome in advanced squamous cell carcinoma of the lung

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05820375

Position: Peer Reviewer

Academic degree: MD

Professional title: Consultant Physician-Scientist, Research Associate

Reviewer’s Country/Territory: United Kingdom

Author’s Country/Territory: China

Manuscript submission date: 2021-10-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-29 15:55

Reviewer performed review: 2021-11-01 12:12

Review time: 2 Days and 20 Hours

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SPECIFIC COMMENTS TO AUTHORS

Jingyi Wu and colleagues have reported an interesting case report on SJS after just one administration of pembrolizumab in a patient with NCLC. There are already several case reports on SJS/TEN after treatment with immune checkpoint inhibitors, but this case is still interesting as the adverse event already appeared after one administration, and because it is a rare but serious complication that needs to be highlighted. I have few comments:


Line 13: you mention 5 case reports but refer to 8 reports? There are more case reports than the one you mention, so I’d rather say several case reports. You can also refer to a recent systematic review (Maloney et al, doi:10.1111/ijd.14811).

Case: Staging: please mention which TNM was used, 8th edition? I guess it is M1b and stage IVA? based on solitary extrathoracic metastasis? - p.5 line 19: I believe liver metastasis? as it was a solitary metastasis? - Physical examination: it would be interesting if the authors can mention if the patient had any mucous lesions? - p.6 line 23: the authors mention 3-month treatment? I thought the patient only received one cycle of chemo-immunotherapy? Or was it the 3-month evaluation? Discussion: Improved survival in case of irAEs has also already been described in lung cancer patients, so I would refer to those reports instead of renal cancer/melanoma. (e.g., Shankar et al, doi:10.1001/jamaoncol.2020.5012)

Unfortunately, there are many vocabulary and grammar errors: Abstract: - Line 1: abstract instead of abstrat - Line 3: have instead of has - Line 5: remove while - Line 10: a 68-year-old female - Line 11: remove syndrome - Line 13 it is unclear what the authors want to say? Prednisone, symptomatic, anti-infectious, gamma globulin, and antipruritic
therapy? - Line 14: remove and so on; did the skin toxicity reduce or disappear? Maybe the authors meant reduced and eventually disappeared? - Line 16: patient instead of patients Intro: - Line 7: and included especially cutaneous side-effects Case: - Line 3: she instead of he - Line 7: clearly instead of obviously (also on p.6 line 3) - One cycle instead of cycles (p.5 line 5 and 7) - p.5 line 12: or other instead of and so on, line 22: which were instead of with - Itchiness instead of itching (p.6 line 6, figure 10 and 11) - p.6 line 16: remove without further delay - p.6 line 19: remove symptoms of Conclusion: - line 2: remove be (to overcome) Please note the correct use of abbreviations: Abstract: once abbreviated, there is no need to abbreviate again (abstract line 4 ICI) or use the full word again (abstract line 9); intro: mention SJS as abbreviation (line 8); case: p.4 line 5 chest computed tomography (CT), line 6 magnetic resonance imaging, line 8 CT, p.6 line 12 remove Stevens-Johnson syndrome; discussion: non-small cell lung cancer (NSCLC), p.7 line 7 remove Stevens-Johnson syndrome, p.7 line 18 toxic epidermal necrolysis instead of TEN, p.8 line 3 overall survival, p.8 line 4 irAEs, line 18 tumor necrosis factor instead of TNF.
RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: A case of pembrolizumab-induced Stevens-Johnson syndrome in advanced squamous cell carcinoma of the lung
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Peer-review model: Single blind
Reviewer’s code: 05449007
Position: Peer Reviewer
Academic degree: MBBS, MD
Professional title: Academic Fellow, Doctor
Reviewer’s Country/Territory: United States
Author’s Country/Territory: China
Manuscript submission date: 2021-10-10
Reviewer chosen by: Ji-Hong Liu
Reviewer accepted review: 2021-12-29 21:42
Reviewer performed review: 2021-12-29 21:45
Review time: 1 Hour

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| Peer-reviewer      | Peer-Review: [ Y] Anonymous | [ ] Onymous |


SPECIFIC COMMENTS TO AUTHORS
Response to my review seems appropriate and corrections have been made