PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 02887546

Position: Editorial Board

Academic degree: MAMS, MBBS, PhD

Professional title: Dean, Doctor, Professor

Reviewer’s Country/Territory: India

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-23 13:09

Reviewer performed review: 2021-05-23 15:04

Review time: 1 Hour

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SPECIFIC COMMENTS TO AUTHORS
The authors have not given detail of the surgery. Was the tumour resectable totally? What was done for the lung deposit? Was any post operative chemotherapy started? How much time has elapsed after the surgery? What is the morbidity status of the patient post operatively. These details will make the paper more scientific. There are certain grammatical corrections noted in the reviewed file returned. They may be incorporated.
Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 05180942

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Associate Professor

Reviewer’s Country/Territory: Turkey

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Raymond Pranata

Reviewer accepted review: 2021-05-25 14:25

Reviewer performed review: 2021-05-25 16:09

Review time: 1 Hour

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SPECIFIC COMMENTS TO AUTHORS
Dear author; 1) The limitations of the ultrasound and CEUS examinations in mediastinal masses should be mentioned. 2) Abbreviations to be used in the text should be used in parentheses just after the first use of the abbreviated words in the text.
### Name of journal:
World Journal of Clinical Cases

### Manuscript NO:
68410

### Title:
Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

### Reviewer’s code:
05480421

### Position:
Peer Reviewer

### Academic degree:
MD, MSc

### Professional title:
Surgeon

### Reviewer’s Country/Territory:
Greece

### Author’s Country/Territory:
China

### Manuscript submission date:
2021-05-23

### Reviewer chosen by:
AI Technique

### Reviewer accepted review:
2021-05-23 16:59

### Reviewer performed review:
2021-05-31 11:03

### Review time:
7 Days and 18 Hours

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SPECIFIC COMMENTS TO AUTHORS

I have read this manuscript with great interest as I have worked on a manuscript recently regarding leiomyosacomas. In general, I found the subject quite interesting and the present manifestation quite rare. There are a lot of issues regarding grammar, terminology and English language in general. A revision from a native English speaker will benefit the overall quality of the manuscript. Furthermore, I have attached a file with some comments I have attached on the manuscript. Could you please explain if there were clear indication for EVAR on the first time? Please use literature guidelines.
Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 05493354
Position: Editorial Board
Academic degree: MD

Professional title: Associate Professor

Reviewer’s Country/Territory: Turkey

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Raymond Pranata

Reviewer accepted review: 2021-05-26 11:07

Reviewer performed review: 2021-06-01 15:26

Review time: 6 Days and 4 Hours

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Peer-reviewer statements

Peer-Review: [Y] Anonymous | [ ] Onymous
Conflicts-of-Interest: [ ] Yes | [Y] No
The authors demonstrate the diagnostic value of contrast-enhanced ultrasound in a patient with rare mediastinal leiiosarcoma. It is an important article in terms of the use of contrast ultrasound and may contribute to the literature. However, the authors need to make some changes. Case presentation; Q1. The mass showed heterogeneous enhancement on the enhanced scan Use "contrast-enhanced CT scan" instead of "enhanced scan" Q2. Figure 1 has both CT images and PET/CT images. However, PET findings were not mentioned in the sentence in which Figure 1 was referred to in the article. A/B and C/D in Figure 1 can be separate figures. The sentences in which the Figures are cited in the article should describe the findings in the relevant Figure. Figure 1 and Figure 2 legends are insufficient. Please describe it more clearly and adequately for the reader to understand. Q3. As above, write Figure 4 and other Figure legends more clearly for the reader Q4. I suggest describing the pathological findings in the last part of the case presentation. For example, which immunostainings made the diagnosis of leiomyosarcoma? Which were positive? Write more clearly Q5. Discussion and Conclusions Write only "Discussion" in the title Q6. Look out for punctuation where references are cited. For example, in the sentence below, a point is used twice. please edit. ...but the most common location is the posterior mediastinum.[1, 10, 11].
# PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases  
**Manuscript NO:** 68410  
**Title:** Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report  
**Reviewer’s code:** 05465429  
**Position:** Peer Reviewer  
**Academic degree:** MD  
**Professional title:** Doctor, Staff Physician  
**Reviewer’s Country/Territory:** Italy  
**Author’s Country/Territory:** China  
**Manuscript submission date:** 2021-05-23  
**Reviewer chosen by:** Raymond Pranata  
**Reviewer accepted review:** 2021-05-25 08:25  
**Reviewer performed review:** 2021-06-01 21:18  
**Review time:** 7 Days and 12 Hours

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| Re-review          | [ Y] Yes | [ ] No |

| Peer-reviewer statements | Peer-Review: [ Y] Anonymous | [ ] Onymous |
|                          | Conflicts-of-Interest: [ ] Yes | [ Y] No |
Dear Author,

I read with interest the manuscript entitled "Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report and literature review". This was a case report reporting the relevance of CEUS in the diagnosis of primary mediastinal leiomyosarcoma. Although I consider the manuscript relevant for the research context, I have the following comments:

Major 1. Title: the term literature review should be obviated. Alternatively materials, methods and results of the performed narrative review should be clearly reported.

Minor 1. Case presentation: Pain was radioactive --> Please revise.

2. Case presentation: It is generally supposed that, hyperechoic regions were mainly composed of solid tissue, whereas hypoechoic regions contained more liquid component --> add citation.

3. Case presentation: The high-density mass part had increased fluorodeoxyglucose (FDG) metabolism, while the low-density part had decreased FDG metabolism. --> please add standardized uptake value (SUV).

4. Case presentation: Please add more details regarding the performed surgical operation.

5. Discussion and conclusions: These characteristics help differentiate leiomyosarcomas from thrombi as thrombi usually have high signal intensity on both T1 and T2 sequences no enhancement after gadolinium administration --> the sentence is poorly understandable; please revise.

6. Discussion and conclusions: The term “liquid hypoechoic” should be modified as follow: “liquid anechoic”.
Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 05458764

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer’s Country/Territory: Croatia

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Raymond Pranata

Reviewer accepted review: 2021-05-25 04:17

Reviewer performed review: 2021-06-02 12:18

Review time: 8 Days and 8 Hours

Scientific quality

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

Language quality

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

Conclusion

[ ] Accept (High priority)  [ ] Accept (General priority)
[ ] Minor revision  [ Y] 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
The manuscript entitled “Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report and literature review” by Xiujing Xie et al. requires major revision before potential publication despite interesting case with potential diagnostic value. Major concerns are as follows: 1. The language quality of the manuscript is very poor and some parts of the text are completely unclear. 2. Phrases such as “We do not recommend performing PET/CT without any initial distinction but recommend performing CEUS by an experienced sonographer routinely and as soon as possible.” should be avoided as this is the “only” case report and such strong recommendations should be avoided. 3. Please report what kind of stents were used for aorta repair. What was the final result of the repair? Did you perform control CTA after the treatment? Any sign of “leak”? 4. Please explain why did you perform CEUS over CTA? Which part of the aorta have you examined? The thoracic aorta is hard to visualize on the ultrasound. 5. Authors should avoid imprecise and descriptive words such as “huge tumor”. Please report size. “During surgery, the huge tumor grew in the mediastinum and retroperitoneum, surrounded the thoracic aorta, and invaded the left lung. There were lots of necrotic tissue and blood in the tumor.” 6. Sentences such as “Leiomyosarcoma is considered the primary mediastinum because it does not adhere to the aorta, and the mediastinum volume is larger than that the retroperitoneum volume.” is not precise. Please specify where the tumor was located. Furthermore, specify what kind of operation was performed? What was removed? How was the aorta reconstructed? Where and why do you believe the primary tumor location was? 7. Authors are referring to guidelines for CEUS In AAA but the case described primary sarcoma in the mediastinum (?). As mentioned before, more clarification on tumor precise localization,
extent, and size is mandatory.
PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 05710028

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer’s Country/Territory: Japan

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Raymond Pranata

Reviewer accepted review: 2021-05-24 12:28

Reviewer performed review: 2021-06-02 14:29

Review time: 9 Days and 2 Hours

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SPECIFIC COMMENTS TO AUTHORS
This is a manuscript describing the usefulness of CEUS for the differential diagnosis of pathologies around the aorta. I have some concerns about the following issues.  
1. The most important point in such a situation is the first diagnosis on admission of the patient. I think CEUS is really useful in this timing as authors mentioned. However, authors performed CEUS in the second admission. In this timing, tumorous pathology is easily expected by only CT scan, without needing of PET-CT or CEUS. It did not like endoleaks after EVAR. Even though, in discussion, authors mainly discuss about endoleaks after EVAR. I think this is unnecessary. Authors should mention about the usefulness in the differential diagnosis in the first admission, prior stent graft insertion.  
2. CT scan on first admission revealed heterogenous enhancement in the mass. I suppose this enhancement does not like aortic hematoma. Why did not authors perform additional examination including CEUS or MR? Please note the reason.  
3. Why did not authors perform endoscopic ultrasound-guided tissue acquisition (EUS-TA)? EUS-TA is a strong tool for differential diagnosis of tumor type.  
4. How was the long-term survival of this patient?  
5. Was surgery appropriate for the management of this patient, who had apparent metastatic lesions?
Name of journal: World Journal of Clinical Cases

Manuscript NO: 68410

Title: Diagnostic value of contrast-enhanced ultrasonography in primary mediastinal leiomyosarcoma mimicking an aortic hematoma: case report

Reviewer’s code: 05710028

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer’s Country/Territory: Japan

Author’s Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-08-11 12:50

Reviewer performed review: 2021-08-11 20:37

Review time: 7 Hours

Scientific quality

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Conclusion

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Peer-reviewer statements

Peer-Review: [Y] Anonymous   [ ] Onymous
Conflicts-of-Interest: [ ] Yes  [Y] No

SPECIFIC COMMENTS TO AUTHORS
Authors have revised their manuscript in accordance with comments. I have one comment. Title: case report ➡ a case report