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## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Ophthalmology

**ESPS manuscript NO:** 12075

**Title:** Pseudopemphigoid: A Review

**Reviewer code:** 02502338

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-06-21 01:11

**Date reviewed:** 2014-06-21 11:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

Comments to the authors: In this review article, the authors have summarized all clinical and immunological information for pseudopemphigoid. Although cicatricial conjunctivitis are caused by various factors, the authors focus on drug-induced conjunctival cicatrization (DICC) and two pemphigus diseases, including ocular pemphigus vulgaris (OPV) and paraneoplastic pemphigus (PNP). This is a well-written review, containing large information and ample of references. Organization of the manuscript is good, and English are adequate. However, I have several comments, which may be helpful to improve the manuscript. (1) The description for the relationship between DICC and mucous membrane pemphigoid (MMP) is interesting and intriguing. Although MMP is not considered to be drug-induced disease, there may be a possibility that drug might be main cause of MMP. The authors should discuss about and emphasize this issue. (2) In the discussion for the relationship between DICC and MMP, the authors described about epitope spreading. In their story, epitope spreading is an event that the damage to cornea by drug exposed certain antigens, which activate T and B cells. However, epitope spreading usually mean the expansion of autoantibodies to previous epitopes to autoantibodies to other epitopes, which are either intramolecular or extramolecular. The authors should consider the theory of epitope spreading, and rewrite the section, if necessary. (3) In dermatological field, OPV is not very common, and is not well characterized. Therefore, the authors should describe in more detail for the pathophysiology of OPV and for the difference between OPV and pemphigus vulgaris (PV) without



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ocular involvement. (4) Although we know that a few PV patients show lid margin erosion and conjunctival hyperemia, we have not seen PV patients with conjunctival ulceration pseudomembrane formation. Therefore, I suspect that the diagnoses of PV in the previous reports of OPV were not correct, and such patients might have either MMP or PNP. The authors should discuss about this possibility. (5) In Table 5, the authors described the molecular weight of desmoglein 1 as 165 kDa. However, it is now usually described as 160 kDa in most study, and the authors should change it.



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**Reviewer code:** 00505284

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-06-21 01:11

**Date reviewed:** 2014-07-28 22:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

The authors present an informative and timely review of a quite devastating ocular disease family. The review provides the reader with a fairly well thought out up-to-date comparison of the epidemiology, clinical findings, diagnosis, and treatments for mucous membrane pemphigoid, pseudopemphigoid, drug-induced cicatricial conjunctivitis, pemphigoid vulgaris and paraneoplastic pemphigoid. We wholeheartedly agree with their conclusion. Minor suggestions: 1. The format of the outline and text as well as reference should be checked. (There may have been some shifting of margins during transmission of the manuscript.) 2. The order of the tables as they appear in the text is out of sequence. 3. In several places an acronym is provided, but not used in the subsequent text. 4. Fig 1; The high magnification photos are sufficient. 5. Pathology slides showing differential conjunctival staining pattern would add significantly to the paper.