PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases
Manuscript NO: 92843
Title: Clinical outcome in giant cell tumor of the thoracic spine after two total en bloc spondylectomies including one emergency surgery: a case report and review of literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed
Peer-review model: Single blind
Reviewer’s code: 03072151
Position: Editorial Board
Academic degree: MD, MSc
Professional title: Academic Editor, Associate Professor, Attending Doctor, Neurosurgeon, Surgeon
Reviewer’s Country/Territory: Taiwan
Author’s Country/Territory: China
Manuscript submission date: 2024-02-07
Reviewer chosen by: AI Technique
Reviewer accepted review: 2024-02-13 04:49
Reviewer performed review: 2024-03-01 07:18
Review time: 17 Days and 2 Hours

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<th>Scientific quality</th>
<th>Grade A: Excellent</th>
<th>Grade B: Very good</th>
<th>Grade C: Good</th>
<th>Grade D: Fair</th>
<th>Grade E: Do not publish</th>
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<td>Novelt...</td>
<td>Grade A: Excellent</td>
<td>Grade B: Good</td>
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<td>Grade D: No novelty</td>
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SPECIFIC COMMENTS TO AUTHORS
Dear editor and authors, I have read the manuscript entitled “Clinical outcome in giant cell tumor of the thoracic spine after two total en bloc spondylectomies including one emergency surgery: a case report and review of literature” very carefully. The authors reported a rare case of acute paraplegic patient with thoracic spinal giant cell tumor (GCT) who underwent repeated total en bloc spondylectomy (TES) surgeries. It is written satisfactorily with helpful figures. The topic is relevant, interesting, and original. This case study reported the successful clinical challenges and nuances of a successful management of the patient presented with thoracic spinal GCT resected using the TES techniques. The authors achieved a safer and more optimistic solution satisfactorily although the duration of follow-up was a little bit short. The language applied throughout the manuscript is coherent. Nevertheless, the manuscript has some shortcomings that need to be revised again.

Please ensure that the information is
presented according to the CARE checklist. At the end of Introduction section, the authors mentioned a 15-month follow-up. However, it was mentioned in Figure 1 that the patient first visited emergency department in 2020 and the patient’s daily activities were normal in 2023. Please clarify the actual follow-up duration. The possible complications resulting from the techniques applied should be mentioned more clearly. What can the surgeons do to avoid such lethal complications? Please give a more detailed description of the possible complications resulting from thoracic GCT as most of the readers of the journal may not be familiar with the field. The authors claimed in Conclusion section that “This is the first report of a patient with sudden back pain and acute paraplegia secondary to thoracic spinal GCT who underwent emergency TES, successfully recovering spinal cord function and avoiding permanent paralysis.”. The authors claimed the lesson of new information to our surgical knowledge from their case report. Is this really the first report? The authors need to provide compelling reasons in the manuscript why their case merits publication. How is this specific case a contribution to the literature? Please clarify the innovation in your case presentation. When I search “giant cell tumor thoracic surgery” in PubMed, there comes out to be more than 400 search results. Therefore, I recommend the authors to collate all the related cases reported in the literature and list a table to demonstrate the rarity and novelty of the present case to the authors, worth to be presented and published to raise the awareness of the clinician and undoubtedly add contribution to the scarce literature on this topic.