Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 90093

Title: Appendiceal mucinous neoplasm: A Case Report and Literature Review

Provenance and peer review: Unsolicted Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 04025443

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor, Senior Researcher

Reviewer’s Country/Territory: Russia

Author’s Country/Territory: Taiwan

Manuscript submission date: 2023-11-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-30 18:05

Reviewer performed review: 2023-12-03 21:39

Review time: 3 Days and 3 Hours

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<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ ] Grade B: Very good</th>
<th>[Y] Grade C: Good</th>
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<td>[ ] Grade D: Fair</td>
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<th>Novelty of this manuscript</th>
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<th>Creativity or innovation of this manuscript</th>
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<td>[ ] Grade C: Fair</td>
<td>[ ] Grade D: No creativity or innovation</td>
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SPECIFIC COMMENTS TO AUTHORS
I read with interest the manuscript by Hao-Cheng Chang and colleagues "Appendiceal mucinous neoplasm: from incidental discovery to in-depth understanding – A case report" submitted to World Journal of Gastroenterology. The authors described a rare case of metachronous cancer - an appendiceal mucinous tumor and transverse colon adenocarcinoma, and provided interesting discussion. This manuscript may bring new to the field and may be interesting to the readers. However the "in-depth understanding" stated in the title is far from being reached yet. This may require correction of the title. Moreover, according to what is described, may it be better to reflect the literature review in the title (a case report and literature review)? This could allow higher interest from the readership. Although the concurrent diagnosis (transverse colon adenocarcinoma) is not in the main focus of the case, it would be nice to reflect full histological description.

Introduction: I would suggest that the authors add more detailed information on why this case may be interesting. I’d like to advert the attention of the authors that the type of the paper is a description of a case, then, "This study examines..." is not correct. Please, describe more details on the laboratory abnormalities with certain values obtained.
Figures: Please, mark specific points of interest on the images. Please, disclose all the abbreviations at the footnotes (some of them are not clear). Fig. 5 - please, check, whether correct verb is used in the sentence starting with "Immunohistochemically..." (plural or singular). I hope that my comments help the authors make their manuscript even better.
## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 90093

**Title:** Appendiceal mucinous neoplasm: A Case Report and Literature Review

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 03815231

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Chief Physician, Professor

**Reviewer’s Country/Territory:** China

**Author’s Country/Territory:** Taiwan

**Manuscript submission date:** 2023-11-29

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-12-02 03:24

**Reviewer performed review:** 2023-12-04 08:44

**Review time:** 2 Days and 5 Hours

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<td>[ ] Grade C: Fair</td>
<td>Y Grade D: No creativity or innovation</td>
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### Scientific significance of the conclusion in this manuscript

- [  ] Grade A: Excellent
- [  ] Grade B: Good
- [  ] Grade C: Fair
- [ Y ] Grade D: No scientific significance

### Language quality

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

### Conclusion

- [  ] Accept (High priority)
- [  ] Accept (General priority)
- [  ] Minor revision
- [  ] Major revision
- [ Y ] Rejection

### Re-review

- [  ] Yes
- [ Y ] No

### Peer-reviewer statements

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

### SPECIFIC COMMENTS TO AUTHORS

1. **low-grade mucinous neoplasm is common in appendix and is not a rare tumor.** There is nothing particularly special about the present case. The histological and immunohistochemical results of present case were also typical.

2. The patient had transverse colon adenocarcinoma accompanied with low-grade appendiceal mucinous neoplasm. **What was the subtype of the colon adenocarcinoma? Did it contain mucinous adenocarcinoma components?** Before diagnosing LAMN, it is necessary to exclude the involvement of colon mucinous adenocarcinoma in the appendix. The authors did not describe and discuss the above question.

3. The immunohistochemical examination is important for pathological diagnosis of LAMN, but immunohistochemistry is not absolutely specific, and we cannot rely entirely on immunohistochemistry. Clinical and imaging manifestations are more important. The author did not specify whether there is a space occupying lesion in the ovaries. If no lesions are found in the ovaries, there is no need to overly consider the ovarian origin.