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International Journal of Surgery Case Reports <em@editorialmanager.com>

1 Mei 2021 14.59

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Kepada: Laksmi Wulandari <laksmi.wulandari@fk.unair.ac.id>

International Journal of Surgery Case Reports

Title: Hemoptysis in Aspergilloma with Diabetes Mellitus Type 2 Patient: A Rare Case in Indonesian Adult

Authors: Gilang Muhammad Setyo Nugroho; Laksmi Wulandari

Dear Mrs Laksmi Wulandari,

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Title: Hemoptysis in Aspergilloma with Diabetes Mellitus Type 2 Patient: A Rare Case in Indonesian Adult  
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Ms. Ref. No.: IJSCASEREPORTS-D-21-00608

Title: Hemoptysis in Aspergilloma with Diabetes Mellitus Type 2 Patient: A Rare Case in Indonesian Adult  
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Dear Mrs Wulandari,

Reviewers have now commented on your paper. You will see that they are advising that you revise your manuscript. If you are prepared to undertake the work required, we would be pleased to reconsider our decision.

For your guidance, reviewers' comments are appended below.

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Reviewers' comments:

Managing Editor

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Please pay particular attention to the following criteria which are often missed:

- Who performed the procedure? (item 9d)
- patient perspective (item 12)
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- Where relevant - intervention adherence and tolerability (item 10c)
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Agha RA, Franchi T, Sohrabi C, Mathew G, for the SCARE Group. The SCARE 2020 Guideline: Updating Consensus Surgical CAse REport (SCARE) Guidelines, International Journal of Surgery 2020;84:226-230.

3. Please cite the SCARE 2020 paper above in your text in the methods section and the add the reference to your

references section.

4. Please ensure you submit a structured abstract with sub-headings as follows:  
Introduction and importance, Case presentation, clinical Discussion, Conclusion

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6. Please be very clear about what this adds to the existing literature and clearly detail learning points.

7. Please ensure you submit your work with a Research Registry unique identifying number (UIN) if its first in man i.e. the first time a new device or surgical technique is performed: [www.researchregistry.com](http://www.researchregistry.com) – it can't progress without being registered. Please ensure you also state your registration UIN in your methods section and reference it including a hyperlink to it if registration is appropriate.

8. If you haven't already, please include your "highlights" which are 3-5 bullet points summarising the novel aspects and/or learning points (maximum 85 characters, including spaces, per bullet point).

9. The consent statement in the author form is not suitable. We need a statement like this:

Written informed consent was obtained from the patient for publication of this case report and accompanying images. A copy of the written consent is available for review by the Editor-in-Chief of this journal on request.

Please see consent section in instructions to authors for further information.

10. Please ensure any images/figures/photos are suitably anonymised with no patient information or means of identifying the patient.

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The guarantor is that individual who accepts full responsibility for the work and/or the conduct of the study, had access to the data, and controlled the decision to publish.

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Provenance and peer review

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Reviewer #1: An interesting paper about a very rare topic with a poor prognosis. It is important the good result in this patient. Some questions arise from the lecture:

- 1) The surgical treatment is the best choice but you might be less aggressive as possible. Why didn't you perform the intervention with video-assisted thoracoscopic surgery?
- 2) You said that you performed a fine needle biopsy. Don't you fear the aspergillosis general sepsis induced by the puncture?
- 3) Did you make general antimicrobial therapy during the intervention and after?
- 4) Which were the good prognostic factors presented by this patient in this case? Why did he well?

Reviewer #2: I do not feel there is anything significant finding

Reviewer #3: Thank you for your submission. Unfortunately, there are pervasive errors in grammar and syntax that make the text difficult to follow. At worst, there are passages that suggest misunderstanding of factual information. In addition, the Introduction and Discussion should mention the role of immunocompromised patients in the pathophysiology and epidemiology of Aspergilloma infections. Lastly, there should be a brief discussion of invasive aspergillosis, especially as it pertains to prognosis.

Reviewer #4:

TITLE: we suggest " Hemoptysis in a patient with Pulmonary Aspergilloma and type 2 Diabetes Mellitus: A rare case in an Indonesian adult"

ABSTRACT

Case Presentation: We suggest "A 45-year-old woman with a past history of type 2 diabetes mellitus presented with chronic hemoptysis."

"Clinical presentation and work up revealed a left lung aspergilloma, with x-ray and CT-scan showing a mass in the upper lobe of left lung and FNAB showing Aspergillus sp. The patient underwent thoracotomy with left superior lobectomy."

" Histopathological examination of specimens showed hyphae with septa."

GENERAL REMARKS

Please consider our observations concerning your style. Make corrections of mistakes. Your highlights, keywords and conclusion must be in line with the goals of your paper.

End your introduction with "The work has been reported in line with the SCARE criteria [4]"

Please give more precisions on the importance and type of diabetes in your patient (Body mass index, lipid profile, HbA1c, urinalysis, Full Blood Count, Kidney function tests, etc).

In the clinical presentation, we would appreciate the discussion of main and differential diagnosis before work up. Then the precision on final diagnosis. The type of anesthesia.

Did the patient underwent Pulmonary Function Tests? If yes, please bring precisions.

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International Journal of Surgery Case Reports

Title: Hemoptysis in A Patient with Pulmonary Aspergilloma and Type 2 Diabetes Mellitus: A Rare Case in An Indonesian Adult

Authors: Gilang Muhammad Setyo Nugroho; Laksmi Wulandari

Dear Mrs Laksmi Wulandari,

The PDF for your submission, "Hemoptysis in A Patient with Pulmonary Aspergilloma and Type 2 Diabetes Mellitus: A Rare Case in An Indonesian Adult" has now been built and is ready for your approval. Please view the submission before approving it, to be certain that it is free of any errors. If you have already approved the PDF of your submission, this e-mail can be ignored.

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Title: Hemoptysis in A Patient with Pulmonary Aspergilloma and Type 2 Diabetes Mellitus: A Rare Case in An Indonesian Adult

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Title: Hemoptysis in A Patient with Pulmonary Aspergilloma and Type 2 Diabetes Mellitus: A Rare Case in An Indonesian Adult

International Journal of Surgery Case Reports

Dear Mrs Wulandari,

I am pleased to inform you that your paper "Hemoptysis in A Patient with Pulmonary Aspergilloma and Type 2 Diabetes Mellitus: A Rare Case in An Indonesian Adult" has been accepted for publication in International Journal of Surgery Case Reports.

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Our reference: IJSCR 106125

Article reference: IJSCR\_IJSCASEREPORTS-D-21-00608

Article title: Hemoptysis in a patient with pulmonary aspergilloma and type 2 diabetes mellitus: A rare case in an Indonesian adult

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Indonesia

Phone: not available

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