



Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	Ms_JCTI_19541
Title of the Manuscript:	Primary Synovial Sarcoma of the Prostate: A Review of the Literature
Type of the Article	Review

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
--	---------------------------	---



SDI Review Form 1.6

<u>Compulsory</u> REVISION comments	1. Interesting subject for a case report. However, lines 364-394 show the data that ARE NOT RELATED with the synovial type of sarcoma (Sexton et al [15]). There is no need to lead these data with the aim just to show that PSSP is a rare tumor.	Narrations of sexton et al. [15] to illustrate the rarity of synovial sarcoma of the prostate to illustrate rarity of PSSP have been removed as suggested because it is not absolutely necessary
<u>Minor</u> REVISION comments	1. Minor references (probably, due to the lack of literature data regarding the issue) 2. The text is burdened with diagnostic tools (markers, imaging, etc) in every case of PSSP in section (B); probably, it would be reasonable to create a table with tools used in each case 3. For more easy perception of the information in section (A), it would be better to numerate them, e.g.: 1. Definition; 2. General features of both patterns; 2.1. Biphasic...; 2.2. Monophasic...; ... 6. Radiological Imaging; 6.1. Ultrasound... , etc.	Enumeration of the various sections has been done. The immunohistochemistry details have been added to the table
<u>Optional/General</u> comments	Writers need to improve the interpretation of the content analysis clearly and logically: - historical data (from line 455) more reasonable to be presented earlier. - Please, indicate references to literary sources in section A - Here it is important to critically weigh the findings against the contemporary evidence; the conclusion should contain more data for clinical implication: 1. which markers should	The position of the historical data has been maintained where it is.



	be obtained for differentiation between primary and metastatic synovial sarcoma of the prostate, with adenocarcinoma...? 2. which of them could indicate for the certain treatment strategy?	
--	---	--