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OPEN PEER REVIEW

Breast Imaging Findings of Microcalcifications in Ductal Carcinoma in Situ and Their Correlations with Pathological and Biological Features

Eun Ji Lee, Yun-Woo Chang

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

2 comments · 29 May 2021 – 20 Jul 2021

Referee 1 Reviewer

MAJOR REVISION 29 May 2021

Thank you, dear authors, for submitting this article to the IJR.
From a methodological point of view, similar works have already been published, even with larger sample sizes and a broader scope. As a result, you need to explain the innovation of the work in the purpose section.
In addition, it is necessary to consider the following points:
1. The conclusion should be written in response to the purpose of the study.
2. The manuscript needs to be edited in English.
3. Abbreviations should be used in their standard forms. Excessive use of acronyms makes it difficult to understand the manuscript; they should be used only for frequently repeated words.
4. The scientific writing structure of the manuscript, especially the method section, needs major editing, and it is recommended that the paper entitled "Correlation Between Sonographic Findings and Clinicopathologic and Biologic Features of Pure Ductal Carcinoma In Situ in 691 Patients" be used as a template for editing.
5. The statistical analysis section is incomplete; descriptive and analytical indicators should be explained separately. Also, for each statistical test, the variables whose relationship it was used to examine should be specified. Moreover, when using the Chi-square test, it is better to report the odds ratio along with its 95% confidence interval in the text and tables instead of the significance level.
6. Table 1 should be revised as follows:
6.1. Remove the third row.
6.2. The fourth row should be ordered.

Editor-in-Chief

MAJOR REVISION 20 Jul 2021

Dear authors,
Your article needs Major Revision.
Regards

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Response to reviewer’s comments

Reviewer 1:

From a methodological point of view, similar works have already been published, even with a larger sample size and wider purpose scope. As a result, you need to explain the innovation of the work in the purpose section. In addition, it is necessary to consider the following points:

1. The conclusion should be written in response to the purpose of the study.

→ As following the reviewer's comment, the conclusion was written in response to the purpose of the study.

: Microcalcifications of DCIS detected on imaging were significantly associated with poor prognostic pathological factors such as high nuclear grade and comedo necrosis, and poor prognostic biological factors including ER negative group, HER2 positive groups and high Ki-67 index.

2. The manuscript needs to be edited in English.

➔ **I have received English proofreading, and I will attach a certification of editing.**

3. Abbreviations should be used as standard form. Excessive use of acronyms makes it difficult to understand the manuscript, one should try to do this only for repetitive words.

-> As following the reviewer's comment, some the abbreviation (such as group (G)) was used the full term.

4. The scientific writing structure of the manuscript, especially the method section, needs a major editing, and it is recommended that entitled paper "Correlation Between Sonographic Findings and Clinicopathologic and Biologic Features of Pure Ductal Carcinoma In Situ in 691 Patients" be used as a template for editing.

-> As following the reviewer's recommendation, using the template of recommending journal, method section was rewritten the structures of the manuscript.

5. The statistical analysis section is incomplete; descriptive and analytical indicators should be explained separately. Also, for each statistical test, it should be mentioned that it was used to examine the relationship of what variables. Moreover, when using Chi-square test, it is better to report the value of odds ratio along with 95% confidence interval in the text and tables instead of the significant level.

- **The statistical analysis section was rewritten for descriptive and analytical indicators as follows.**

  : Microcalcifications on MMG and USG were compared with nuclear grade, comedo necrosis, ER positive group, HER2 positive group, triple negative group, and Ki-67 index.

- **In the chi-square test, data for odd ratio with a 95% confidence interval along with p values were added to the text. Since the table has limited space, the odd ratio and 95% confidence interval were added to the text when the p-value is significant. Added description to the above in the statistical analysis of materials and methods.**

6. In Table 1 should be:

6.1. Remove the third row.

→ As you pointed out, the third row in Table 1 was removed.

6.2. The fourth row should be ordered.

→ As you pointed out, the fourth row was ordered.

Reviewer 2:

....

Reviewer 3:

it is original and relevant.

the subject is good

English writing and dissuasion is accepted after minor revision .

Thank you for your considerations.

2 Revision 1

2 comments · 26 Jul 2021 – 19 Sep 2021

Referee 1 Reviewer

ACCEPT 26 Jul 2021

Thanks to the authors for addressing the comments in the manuscript.
At present, it is acceptable for publication in the IJR.

Editor-in-Chief

MINOR REVISION 19 Sep 2021

Dear authors,
Your article needs Minor Revision.
Regards

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Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Response to Associate Editor's Comments:

Thank you for reviewing our manuscript. As follows the review of associate Editor, all of reviewer’s comment were corrected in the revised version of manuscript.

Associate Editor 2:

1-please correct: “Positive microcalcifications on MMG were significantly…..”

: It was corrected as follows the editor's comment.
2-please delete respectively in abstract result.

: It was corrected as follows the editor's comment.
3-please correct 63 to 63 lesions in results of abstract.

: It was corrected as follows the editor's comment.
4-please correct this part in abstract conclusion: “…. including ER negativity, HER2 Positivity and …..”

: It was corrected as follows the editor's comment.
5-please correct “we are aimed” to “we are going to” or “we aim”

: It was corrected as follows the editor's comment.
6-please add Objectives part before method section of paper.

: It was corrected as follows the editor's comment.
7-please add sequential numbers to titles and sub-titles: 1-Background. 2-Objectives. 3-Patients and methods. 3-1-Patients, …….

: It was corrected as follows the editor's comment.
8-please advise with an expert editor. The paper needs English edition. For example; “The positive microcalcifications was classify the following morphology (puncate/ amorphous, coarse heterogeneous/ fine pleomorphic, linear branching) and distribution (group/ segmental/ linear/ regional/ diffuse).” Seems wrong. It could be for example: “The morphology of microcalcifications was classified based on the following morphologies: puncate/ amorphous, coarse heterogeneous/ fine pleomorphic, linear branching. In addition, their distribution was classified based on the following distributions: grouped/ segmental/ linear/ regional/ diffuse).”

: It was corrected as follows the editor's comment.
9-this part seems incomplete: “was scored from to 3+”

:It was corrected as follows : from 1+ to 3+ using immunohistochemical analysis.
10-please correct: “Microcalcifications on MMG and USG were compared with nuclear grade, comedo necrosis, ER positive group, HER2 positive group, triple negative group, and Ki-67 index.”
To the following sentence: “Associations of microcalcification presence on MMG and USG

with nuclear grade, comedo necrosis, positivite ER, positivite HER2, triple negativity and Ki-67 index were assessed. In addition, odds ratios (OR) and their 95% confidence intervals (CIs) were calculated."
Please apply this correction style in all other similar instances. In addition, please delete this repetitive sentence at the end of stat analysis section: "Microcalcifications on MMG and USG were compared to nuclear grade, comedo necrosis, ER positive group, HER2 positive group , which were the statistically significant variables using odds ratios (OR) with 95% confidence interval (CI)."

: It was corrected as follows the editor's comment.
11-this part is wrong: "parametric analysis using Chi-squared test" Chi-square test is a non-parametric test and it is not related to normality of data. This test is used for nominal data while the normality of data is assessed for continuous variables. Please correct this part. please advise with a statistician.

: It was corrected as follows: As the variables in comparative analysis showed non-metric independent variables, non-parametric analysis using Chi-squared test was performed.
12-please correct: "Statistical significance was considered at p-values ….."

: It was corrected as follows the editor's comment.
13-please correct manufacturer data of SPSS. [I think version 20 belongs to IBM]

: It was corrected as follows the editor's comment.
14-please correct: "GroupG3 were association" to "GroupG3 were associated"

: It was corrected as follows the editor's comment.
15-please correct: "The different may be due to …" to "The difference may be due to …."

: It was corrected as follows the editor's comment.
16-please correct "Further studies"

: It was corrected as follows the editor's comment.
17-in figure 1, "who were performed" is wrong. It is "who performed"

: It was corrected as follows the editor's comment.
18-please correct in figure 2A legend: "in lower inner quadrant of right breast"

: It was corrected as follows the editor's comment.
19-in figure 2B, please correct this part: "with consistent with the area of mammography," [this is unclear; there are two withs here]

: It was corrected as follows the editor's comment.
20-in figure 2B, this part is unclear: "Calcifications outside of a mass was the USG classification based on BI-RADS"

: It was corrected as follows: 'Calcification outside of a mass' was the USG classification based on BI-RADS.

21-please correct in figure 2B legend: “negative ER and positive HER2 and high Ki-67 ….”

: It was corrected as follows the editor's comment.

22- please correct in Figure 3B: “positive ER and negative HER2 and low Ki-67 index”

: It was corrected as follows the editor's comment.

23-Table legends are not appropriate. I recommend these ones instead:
Table 1: “Association of Mammographic Microcalcification and Its Morphology and Distribution with Histopathologic Features”
Table 2: “Association of Mammographic Microcalcification and Its Morphology and Distribution with Immunohistochemichal Features”
Table 3: “Association of Sonographic Microcalcification and Its Anatomical Location with Histopathologic Features”
Table 4: “Association of Sonographic Microcalcification and Its Anatomical Location with Immunohistochemichal Features”

: It was corrected as follows the editor's comment.

24-in table 3, the data of comedo necrosis is wrong. Sum of 16 and 13 is 29 not 30 and sum of 52 and 30 is 82 not 81. Please check all of the numerical profiles in tables regarding their accuracy.

: It was corrected as follows the editor's comment.

Thank you for consideration

3 Revision 2

1 comment · 26 Sep 2021

Editor-in-Chief

ACCEPT 26 Sep 2021

Dear authors,
Your article is acceptable for publication in IJR.
Regards