OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Liver Abscess Caused by *Fusobacterium nucleatum*: A Case Report"

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Review Timeline:

Submit Date: 29 May 2021
Revised Date: 15 Jun 2021
Accepted Date: 15 Jun 2021

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

Rezvan Moniri: Associate Editor | Revision (0) 4 Jun 2021

Dear EIC,
I recommend that the following action be taken:
- The abstract should summarize the case, the problem it addresses, and the message it conveys. Abstract information should include (1) Background, (2) Key points from the case; and (3) Main lessons to be learned from this case report.
- The case description should be appropriate details of the case, including demography, history, immunity status, dental hygiene, assessment, findings and investigations results of lab tests, microscopic examination of the abscess fluid, gram stain, blood culture, drain fluid culture, treatment plan, expected outcome of the treatment plan and actual outcome. Mentions intervention in detail or describes the dose, timing, and route of drugs. Describe the therapeutic intervention (pharmacological, surgical) and how the interventions were administrated (dosage, strength, duration, and frequency). The case needs to have all essential details to allow a useful conclusion to emerge.
- The discussion should start by expanding on what has been said in the introduction, focusing on why the case is noteworthy and the problem that it addresses. Mentions the limitations related to the case. Describe the clinical course of the episode of care during follows visits.
- The conclusion should include the implication of the case with a core key message. The

author should explain whether this corroborates with or detracts from current beliefs about the problem and how this evidence can add value to future clinical practice.
- The patient should provide informed consent and the author should provide this information if requested.
Use reliable and relevant references in the discussion.
1. Fusobacterium nucleatum: a rare cause of the pyogenic liver abscess.
Nagpal SJ, Mukhija D, Patel P.Springerplus. 2015 Jun 19; 4:283. doi: 10.1186/s40064-015-1090-8. eCollection 2015.PMID: 26101735 2.
2. [CME: Fusobacterium nucleatum/naviforme - a Rare but Serious Cause for Pyogenic Liver Abscesses].
Rifaat M, Depmeier C, Jeger V, Schneemann M, Anagnostopoulos A.Praxis (Bern 1994). 2018 Sep;107(19):1007-1012. doi: 10.1024/1661-8157/a002995.PMID: 30227799 German.
3. Fusobacterium nucleatum causing a pyogenic liver abscess: a rare complication of periodontal disease that occurred during the COVID-19 pandemic.
Collins L, Diamond T.BMJ Case Rep. 2021 Jan 26;14(1):e240080. doi: 10.1136/bcr-2020-
4. Pyogenic liver abscess caused by Fusobacterium in a 21-year-old immunocompetent male.
Ahmed Z, Bansal SK, Dhillon S.World J Gastroenterol. 2015 Mar 28; 21(12): 3731-doi: 10.3748/wjg.v21.i12.3731.PMID: 25834342
5. Fusobacterial liver abscess: a case report and review of the literature.
Jayasimhan D, Wu L, Huggan P.BMC Infect Dis. 2017 Jun 20; 17(1):440. doi: 10.1186/s12879-017-2548-9.PMID: 28633639
6. Fusobacterium Nucleatum: Atypical Organism of Pyogenic Liver Abscess Might be Related to Sigmoid Diverticulitis.
Wijarnpreecha K, Yuklyaeva N, Sornprom S, Hyman C.N Am J Med Sci. 2016 Apr;8(4): 197-9. DOI: 10.4103/1947-2714.179961.PMID: 27213146
7. Concurrent fusobacterial pyogenic liver abscess and empyema.
Gohar A, Jamous F, Abdallah M.BMJ Case Rep. 2019 Oct 14;12(10):e231994. doi: 10.1136/bcr-2019-231994.PMID: 31615779 Review.
9. A case report of a pyogenic liver abscess caused by Fusobacteriumnucleatum in a patient with autosomal dominant polycystic kidney disease undergoing hemodialysis.
Cigarrán S, Neches C, Lamas JM, García-Trio G, Alonso M, Saavedra J.Ther Apher Dial. 2008 Feb;12(1):91-5. doi: 10.1111/j.1744-9987.2007.00548.x.PMID: 18257820
8. Pyogenic liver abscess caused by Fusobacterium nucleatum with an inflammatory scar in the abdominal cavity.
Inoue K, Watanabe Y, Nagata H, Kojima M.Clin J Gastroenterol. 2021 Apr;14(2):617-620. doi: 10.1007/s12328-021-01376-9.
Denture-Associated Oral Microbiome and Periodontal Disease Causing an Anaerobic Pyogenic Liver Abscess in an Immunocompetent Patient: A Case report and review of the Literature.
Hammami MB, Noonan EM, Chhaparia A, Khatib FA, Bassuner J, Hachem C.Gastroenterology Res. 2018 Jun;11 (3):241-246. doi: 10.14740/gr1006w.
Thanks.

REFEREE: EIC | **Revision (0)** 5 Jun 2021

Dear Authors,

Thank you for submitting your manuscript to JJM. I have completed the review of your manuscript and a summary is appended below (Pleases find attached files). The reviewers recommend the reconsideration of your paper following major revision. I invite you to resubmit your manuscript after addressing all reviewer comments. Please answer point by point to reviewer's comments on a separate sheet under WORD format and write your modifications in the revised version (WORD format) in colored or highlighted letters. Your answers to reviewers' queries are not only for the Editorial Board but for the readers and should be included, when appropriate, in the manuscript for improvement and a better understanding.

When resubmitting your manuscript, please carefully consider all issues mentioned in the reviewers' comments, outline every change made a point by point, and provide suitable rebuttals for any comments not addressed. In addition, JJM INSTRUCTION is attached to the mail, Pleases find it.

Note:

Please add ORCID number into you and your collages account, then automatically appear in your published papers in JJM both in HTML and pdf. Pleases follow the below link for the process. https://sites.kowsarpub.com/jjm/knowledgebase/category/tree.html#orcid.html

Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Dear editors and reviewers:

Thank you for your letter and the comments concerning our manuscript titled with "Liver Abscess Caused by *Fusobacterium Nucleatum*： A Case Report" (ID number: 586764). These comments are very valuable for improving our paper and provided important guiding significance for our research. We have studied these comments very carefully and have made corrections that we hope will meet with approval. The main corrections in the paper and ours responses to your comments are as follows.

Associate Editor 1:

Dear authors

I recommend that the following action be taken:

1. The abstract should summarize the case, the problem it addresses, and the message it conveys. Abstract information should include (1) Background, (2) Key points from the case; and (3) Main lessons to be learned from this case report.

Answer: Thank you for your advice. We have referred to other published case reports and simplified and revised the previous summary to ensure that it contains the aspects you require.

2. The case description should be appropriate details of the case, including demography, history, immunity status, dental hygiene, assessment, findings and investigations results of lab tests, microscopic examination of the abscess fluid, gram stain, blood culture, drain fluid culture, treatment plan, expected outcome of the treatment plan and actual outcome. Mentions intervention in detail or describes the

dose, timing, and route of drugs. Describe the therapeutic intervention (pharmacological, surgical) and how the interventions were administrated (dosage, strength, duration, and frequency). The case needs to have all essential details to allow a useful conclusion to emerge.

Answer: Thank you for your advice. We added the oral hygiene, immunity status and medication history of the patient in line 43-45 of the revised manuscript. At the same time, we added whether the patient had complications in line 74 of the revised manuscript. Details of diagnosis and medication have been described in the previous manuscript.We added the drugs that the patient took after discharge and the follow up in line of 75-78 of the revised manuscript.

3.The discussion should start by expanding on what has been said in the introduction, focusing on why the case is noteworthy and the problem that it addresses. Mentions the limitations related to the case. Describe the clinical course of the episode of care during follows visits. The conclusion should include the implication of the case with a core key message. The author should explain whether this corroborates with or detracts from current beliefs about the problem and how this evidence can add value to future clinical practice.Use reliable and relevant references in the discussion.

Answer: Thank you for your advice. We have carefully reviewed the literature you recommended, revised the discussion section of the manuscript, quoted valuable places, and made a conclusion at the end of the manuscript. Please check the places marked in red. These places have made important changes to the original manuscript.

4.The patient should provide informed consent and the author should provide this information if requested.

Answer: Thank you for your advice. We obtained the informed consent from the patient and submitted it.

Supplementary notes: Thanks for the attachment sent by the editor, we rechecked the format of the manuscript and adjusted the font size, keywords, citation format, etc. according to the relevant requirements.All of the manuscripts with major revisions were marked in different colors. Once again, We’d like to thank the editor for his attention to our manuscript, especially for providing us with very valuable references, which greatly enriched the content of the manuscript. We look forward to receiving your reply as soon as possible.

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (1) 15 Jun 2021

Dear EIC
The manuscript is completely revised according to reviewer comments by authors and it is acceptable for publishing.
Thanks.

REFEREE: EIC | **Revision** (1) 15 Jun 2021

Dear Author,
I am pleased to inform you that your manuscript has been accepted for publication in the Jundishapur Journal of Microbiology and sent to the publisher for the next process. Please remember to always include your manuscript number, whenever inquiring about your manuscript. When you receive the proofs for your article, please check all names and affiliations very carefully, as these cannot be corrected once the article is published. Moreover, please add the ORCID number to you and your collages account as soon as possible. For more details
https://sites.kowsarpub.com/jjm/knowledgebase/category/tree.html#orcid.html
Thanks.