



REVIEWER'S REPORT

Manuscript No.: IJAR-56383

Title: Thyroid angiosarcoma: A case report and review of literature

Recommendation:

Accept after major revision

Rating	Excel.	Good	Fair	Poor
Originality		✓		
Techn. Quality				✓
Clarity			✓	
Significance			✓	

Detailed Reviewer's Report

The manuscript describes a rare and aggressive malignancy—primary thyroid angiosarcoma—and is therefore of potential clinical and educational value. The diagnosis is plausible and supported by immunohistochemical markers, and the figures are relevant.

However, the manuscript in its current form does not meet journal standards for a case report with literature review. Major deficiencies exist in case detail, literature synthesis, diagnostic documentation, figure presentation, and referencing accuracy.

Major Issues

Despite the title, the “review of literature” is limited to a very brief narrative paragraph. No synthesis, comparison with previously reported cases, or contextual analysis is provided.

- 1. Authors must substantially expand the literature review (preferably with a summary table of reported cases) covering demographics, presentation, diagnosis, treatment, and outcomes.**

Key clinical details are missing: symptom duration, thyroid function status, tumor size, extent of invasion on imaging, lymph node status, and staging. Radiological findings are shown but not described in the text.

- 2. Provide a complete, structured case description allowing meaningful comparison with published cases.**

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While ERG, CD31, and CD34 positivity is stated, negative markers used to exclude differential diagnoses (e.g., anaplastic thyroid carcinoma) are not reported. Justification for classifying the tumor as *primary* thyroid angiosarcoma is insufficient.

3. Expand immunohistochemistry reporting, including negative markers and exclusion of key differentials.

Figure legends lack stain type, magnification, and descriptive interpretation. No immunohistochemistry images are provided, despite IHC being central to diagnosis.

4. **Improve figure legends and include representative IHC photomicrographs.**

No statement on informed consent or ethics approval/waiver is included. CARE guideline adherence is not mentioned.

5. **Add an ethics/consent statement and align the manuscript with CARE case-report guidelines (including a patient timeline).**

Minor Issues

- Language and grammar require professional editing.
- The conclusion is generic and could better emphasize the diagnostic and clinical lessons learned.