

REVIEWER'S REPORT

Manuscript No.: IJAR-59402

Title: A Rare Pattern of Breast Cancer Recurrence on 18F-Fluorodeoxyglucose-Positron Emission Tomography/Computed Tomography: Isolated Micronodules In Distant Adipose Tissues.

Recommendation:

Accept as it is
 Accept after minor revision.....
 Accept after major revision
 Do not accept (*Reasons below*)

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

Reviewer Id: JPR-427

Reviewer's Comment for Publication.

The manuscript presents an interesting and uncommon case of breast cancer recurrence involving distant subcutaneous adipose tissues without detectable involvement of the skin or other major organs. The case highlights the potential diagnostic limitations of initial ¹⁸F-FDG PET/CT in detecting very small metastatic lesions and emphasizes the importance of follow-up imaging in patients with persistently elevated tumor markers. The report has educational value for nuclear medicine physicians, radiologists, and oncologists. The manuscript is suitable for publication after minor revisions addressing the following points:

- Abstract:** The abstract should be revised for grammatical accuracy and conciseness. The discrepancy between the patient's age of 41 years in the abstract and 51 years in the case report must be corrected.
- Case presentation:** The authors should clarify the chronology of the initial diagnosis, treatment, and recurrence. The clinical history and the interval between treatment and recurrence should be presented consistently.
- Imaging findings:** The authors should provide a clearer description of the initial PET/CT findings and subsequent progression of the nodules, including their anatomical locations, sizes, and SUVmax values where applicable.
- Discussion:** The discussion would benefit from a concise explanation of the limitations of FDG PET/CT in detecting subcentimeter lesions, particularly the partial-volume effect, and the importance of correlating imaging findings with tumor marker levels.

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5. **Histopathology:** The authors should briefly clarify how histopathological and immunohistochemical findings confirmed the breast origin of the metastatic lesion.
6. **Terminology and abbreviations:** Abbreviations such as EBC, FDG, PET/CT, SUVmax, HR, and HER2 should be defined at first mention. Medical terminology should be used consistently throughout the manuscript.
7. **Figures and captions:** The figure captions should be carefully checked for clarity, grammatical accuracy, and consistency with the text. The arrows indicating the lesions should be clearly visible, and the corresponding anatomical locations should be identified.
8. **References:** The authors should verify the formatting and accuracy of the references and ensure that all citations are consistently presented according to the journal's guidelines.
9. **Language and presentation:** The manuscript requires minor English-language editing to correct typographical errors, spacing problems, grammatical inconsistencies, and awkward sentence structures.

Overall Recommendation: This manuscript describes a rare and educational pattern of breast cancer recurrence that may be useful in clinical practice. The case emphasizes the need for careful interpretation of indeterminate subcutaneous micronodules and appropriate follow-up when tumor markers remain elevated despite initially negative imaging. The manuscript has sufficient clinical and educational relevance for publication, provided that the minor revisions listed above are addressed. I recommend **acceptance after minor revision**.