Reviewer’s report

Title: Calcified mucinous adenocarcinoma of stomach metastatic to the iris: An autopsy case

Version: 0  Date: 01 Nov 2018

Reviewer: Ashwin Akki

Reviewer's report:

1. Do you believe the case report is authentic?  
Yes

2. Do you have any ethical concerns? NO

Please consider if local Institutional Review Board approval or ethical approval was obtained (if appropriate) and if the patient (or their parent or guardian in the case of children under 18) gave written, informed consent to publish this case and any accompanying images. A statement to this effect should appear in the manuscript.

Comments:

3. Does the Introduction explain the relevance of the case to the medical literature?  
Yes

4. Does the article report the following information? Where information is missing, please specify.

a. The relevant patient information, including:
   - De-identified demographic information (age, gender, ethnicity)
   - Main symptoms of the patient
   - Medical, family and psychosocial history
   - Relevant past interventions and their outcomes

b. The relevant physical examination findings

c. Important dates and times in this case (if appropriate, organized as a timeline via a figure or table); if specific dates could lead to patient identification, consider including time relevant to initial presentation, i.e. initial presentation at T = 0, follow up at T = 1 month.

d. Diagnostic assessments, including:
   - Diagnostic methods
   - Challenges (e.g., financial, language/cultural)
   - Reasoning and prognostic characteristics (e.g., staging), where applicable
e. Types and mechanism of intervention

f. A summary of the clinical course of all follow-up visits

Comments: All relevant information is included

5. Is the interpretation (discussion and conclusion) well balanced and supported by the case presented?
Comments: My main concern with this report is the actual diagnosis of mucinous adenocarcinoma. Based on the images provided, this looks more like a "Signet ring cell carcinoma" - a diagnosis that is made when at least 50% of the tumor cells have a signet ring cell morphology. Per some sources, "mucinous gastric cancer" is histologically characterized by extracellular mucinous pools that constitute at least 50% of tumor volume. Mucinous cancer can have cells with signet ring cell morphology but that should be <50%. Although the distinction between the two can be blurry sometimes, the diagnosis is based on the predominant component. The figures provided in this report favor a "Signet ring cell Carcinoma" except for the figure with calcifications floating in mucin pools. It would certainly help if the authors can provide images that truly show a tumor that has abundant mucin with scattered tumor cells to clinch this diagnosis.

6. Is the anonymity of the patient protected? Please consider any identifying information in images such as facial features or nametags, whether the patient is named etc. If not, please detail below.
Yes

7. Is the Abstract representative of the case presented?
Comments: Mostly representative. However, the diagnosis of a Mucinous adenocarcinoma (vs. Signet ring cell carcinoma) needs clarification.

8. Does the case represent a useful contribution to the medical literature?
Comments: Somewhat. There are a few case reports already in the literature with calcifications seen in gastric mucinous adenocarcinomas. Nonetheless, fewer cases have iris metastasis.

9. Additional comments for the author(s)? There are some grammatical errors in the manuscript. For instance, in line 161, the word "preceeding" should read "preceeded" to make the sentence grammatically correct. There are a few other instances like these in the report. Please correct the same.

Level of interest
Please indicate how interesting you found the manuscript:

An article of limited interest

Quality of written English
Please indicate the quality of language in the manuscript:
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No