

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 62890

Title: Escitalopram-induced hepatitis: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02445854

Position: Editorial Board

Academic degree: MD

Professional title: Doctor, Research Assistant Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: France

Manuscript submission date: 2021-08-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-11 15:30

Reviewer performed review: 2021-08-11 16:11

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting case with a thorough review of the literature. The Authors also performed an analysis of the data available on VigiBase, which is the largest pharmacovigilance database. I have few comments: Define the abbreviations at the first mention. Line 65: To which category does escitalopram belong? Line 88: typo mistake (live) Line 118: do you mean “all over the world” instead?

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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06045796

Position: Peer Reviewer

Academic degree: MS

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: France

Manuscript submission date: 2021-08-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-12 07:45

Reviewer performed review: 2021-08-12 09:51

Review time: 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Escitalopram-induced hepatitis is extremely rare, which is very interesting. And, the authors also performed Vigibase analysis in the manuscript. But I have some questions. 1.This is a case report on escitalopram-induced hepatitis, therefore without the need for an extensive description of depression in the background. 2.In the line of 72," without any pain or hyperthermia", but in the line of 87 "the pain stopped". Is there with or without "pain" of the patient? 3.I can't find figure 1 in the manuscript. 4.Whether to screen autoantibodies and immunoglobulin levels of the patient? 5.It is not necessary to describe RUCAM in detail in the manuscript. 6.Why does bilirubin fall more quickly than transaminases during recovery of the patient? It is not common in the clinic, especially in DILI.

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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03269732

Position: Editorial Board

Academic degree: PhD

Professional title: Attending Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: France

Manuscript submission date: 2021-08-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-15 10:13

Reviewer performed review: 2021-08-17 03:28

Review time: 1 Day and 17 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

First, this manuscript's original findings is that escitalopram can cause drug-induced hepatotoxicity and cholestasis, generally within a week after initiation. Second, this is the first reported case of cholestasis where the treatment with escitalopram is the only possible cause, with a highly probable causality. This manuscript find that the serotonergic antidepressants in patients with non-severe depression is the ineffectiveness and harmfulness. Third, the limitations of the study is lacking of course of clinical recovery and biological normalisation after escitalopram withdrawal in the literature review. It is recommended to add a picture of liver pathology or biochemical results to support the evidence of "inflammatory syndrome, cholestasis with a conjugated hyperbilirubinemia and cytolytic hepatitis".