

# PEER-REVIEW REPORT

Name of journal: World Journal of Psychiatry

Manuscript NO: 87125

Title: Cerebrotendinous xanthomatosis presenting with schizophrenia-like disorder: A

case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03658366

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2023-07-25

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-08-14 17:15

Reviewer performed review: 2023-08-14 17:42

Review time: 1 Hour

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ <mark>Y</mark> ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[ ] Grade A: Excellent [ ] Grade B: Good [Y] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation

1



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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ Y] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

1) The authors state in their letter to the editor: "We describe a case of CTX characterized by psychotic symptoms, and hallucinatory delusional syndrome was described for the first time in CTX." However, this has been described previously including in Berginer et al 1988 which they cite. I am also not sure how hallucinations and delusions are any different than psychosis. 2) Please replace all instances of "mental retardation" with "intellectual disability". 3) Please clarify the "episodes of depression" - whether she met criteria for major depressive disorder or whether these were brief spells of tearfulness and depressed mood (i.e. lability) 4) I am not sure if "isoslightly high" is the correct term- please clarify or replace 5) Please replace "common sense" with a more medical term (e.g. logic or judgment) 6) Please fix the grammar as there are many grammatical issues.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02729669

Position: Editorial Board

Academic degree: MD

Professional title: Additional Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2023-07-25

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-08-13 02:53

Reviewer performed review: 2023-08-15 08:39

Review time: 2 Days and 5 Hours

	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

## SPECIFIC COMMENTS TO AUTHORS

a. What do you mean by "catamacts"? Do you mean cataract? b. Why valproate is given at a dose of 1000mg/day? c. It is very surprising that the patient presented with psychosis, improved with 5mg/day olanzapine. What diagnostic system was followed for the diagnosis of psychosis? d. What are the points in favor of diagnosis of psychosis? e. Was it an affective psychosis?



# **RE-REVIEW REPORT OF REVISED MANUSCRIPT**

Name of journal: World Journal of Psychiatry

Manuscript NO: 87125

**Title:** Cerebrotendinous xanthomatosis presenting with schizophrenia-like disorder: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02729669

**Position:** Editorial Board

Academic degree: MD

Professional title: Additional Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2023-07-25

Reviewer chosen by: Cong Lin

Reviewer accepted review: 2023-09-07 03:26

Reviewer performed review: 2023-09-07 03:36

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	<ul> <li>[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing</li> <li>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</li> </ul>
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous





statements

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

### SPECIFIC COMMENTS TO AUTHORS

I am not convinced with the revision done. The abstract should mention about the psychiatric diagnosis (just mentioning psychotic symptoms, does not convey about the diagnosis). The manuscript text mentions the diagnosis mental disorder due to CTX. This diagnosis is nowhere there in the diagnostic system. Follow a standard diagnostic criteria (ICD or DSM) for using appropriate diagnostic category.