

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Critical Care Medicine*

**Manuscript NO:** 80349

**Title:** Vasopressin-Induced Hyponatremia in an Adult Normotensive Trauma Patient

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03851147

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Lecturer

**Reviewer's Country/Territory:** Egypt

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-09-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-09-24 10:40

**Reviewer performed review:** 2022-09-29 23:49

**Review time:** 5 Days and 13 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

#### **SPECIFIC COMMENTS TO AUTHORS**

This case report is well structured overall, and it was found that it adds to current knowledge, but it needs many modifications that we will point out in the comments sections below. 1. In general, the relevance of the report was highlighted, and no breaches of ethical practice were noted 2. The title accurately described the case however you need to include the phrase “a case report” in the title as per the CARE guidelines for case reports. 3. The abstract is too short, it needs to be developed further and structured into background, case presentation and conclusion 4. In the discussion: a. Adequate literature review, but kindly emphasize why the case is important, by focusing on the rarity of the occurrence. b. Explain the medical management chosen and include patient outcome and follow up.

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**Reviewer's code:** 01200577

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-09-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-10-09 09:48

**Reviewer performed review:** 2022-10-17 10:27

**Review time:** 8 Days

<b>Scientific quality</b>	<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**

Dear Author, I read this clinical case that I find well written and documented. However, I have some observations: In the abstract, please explain the reasons why you used exogenous desmopressin and a D5W infusion. In the case description, explain more in detail what examinations you performed to make a differential diagnosis of this patient. Did you measure urinary osmolarity? Why did you not use a hypertonic solution to correct hyponatremia? In the discussion, I think it should be recognized that in this specific patient electrolyte disorder could be the consequence, at least in part, of the trauma. Indeed, it is well-known that encephalic trauma may cause transient dysregulation of water-electrolyte balance (see, Corradetti V, et al. Multiple electrolyte disorders in a neurosurgical patient: solving the rebus. BMC Nephrol. 2013 Jul 10;14:140)