

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 57797

**Title:** Systemic autoimmune abnormalities complicated by cytomegalovirus-induced haemophagocytic lymphohistiocytosis: A case report

**Reviewer's code:** 03260869

**Position:** Editorial Board

**Academic degree:** MD, MSc

**Professional title:** Doctor, Full Professor, Professor

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

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-07-12

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-07-12 16:06

**Reviewer performed review:** 2020-07-20 07:02

**Review time:** 7 Days and 14 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 Grade E: Do not publish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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The manuscript is interesting; however, it requires some answers to comments particularly related to diagnosis of the “autoimmune abnormality” and treatment of the case. The manuscript needs a list of abbreviations as they are a lot. Abstract: Conclusion: this conclusion cannot be drawn from a case report: “HLH patients who have positive ANA accompanied with CMV infection may completely recover when CMV is removed”. “when CMV is removed” is a very strange expression; either it is treated if the patient meets the criteria of treatment of CMV infection, or “CMV infection resolved”. Outcome and follow-up The patient was discharged after her symptoms, and laboratory abnormalities, have improved, and she felt better. She was readmitted twice for fever caused by an autoimmune disease on February 26, 2015, and June 3, 2015 (Figure 3). Her symptoms had relieved after anti-inflammatory and glucocorticoid treatment. The patient was cured with no relapse for six years. What was her autoimmune disease in view of the positive ANA 1:320; was she diagnosed with SLE? Treatment: The treatment the patient received did not include etoposide which is considered the standard of care sine 1980s. Can the authors comment? Discussion: autoimmune abnormalities (AAHS), what does AAHS stand for? infection-associated HLH (IAHS), what does IAHS stand for? Gao et al.[25] demonstrated that ALB and GA levels increase with the recovery from the disease, and this was confirmed in our case (Figure 3). The authors related the low albumin as part of liver affection and did not explain how it returned to normal with recovery. Albumin is a negative acute phase reactant that decreases with inflammation and normalizes with recovery. Conclusion: In summary, we report a case of systemic autoimmune abnormalities complicated by CMV-induced HLH. This statement is very vague and needs re-phrasing. The rest of the conclusion is really not a conclusion of the authors’ work, it is rather literature with



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references: “ Compared to the reported median overall survival of HLH patients being only six months[23], our patient was cured after eliminating the CMV infection, and had no recurrence of HLH for six years, even though her ANA titer remained positive (titer of 1:100). Reviewing previous studies on successful treatment of CMV-related HLH[8,20,27], only one patient was treated with a specific antiviral agent (Ganciclovir), while the others were treated with immunomodulatory and supportive therapy, including IVIG, similar to our patient. It shows us that thorough early screening and timely treatment aimed at removing the triggers (mainly infection) and inhibiting the inflammatory response, along with providing supportive therapy, are of great significance for the prognosis of HLH patients.”

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Professional title:** Doctor, Full Professor, Professor

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

**Author's Country/Territory:** China

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**Reviewer accepted review:** 2020-08-24 04:01

**Reviewer performed review:** 2020-08-25 11:24

**Review time:** 1 Day and 7 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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS



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Abstract: Conclusion: This case emphasizes that thorough early removal of the CMV infection were significant for the prognosis of this HLH patient. Change to: “This case emphasizes that thorough early removal of the CMV infection is significant for the prognosis of this HLH patient. “ No list of abbreviations was added. Not all points answering the comments were changed in the text, e.g. 2) and 3).