

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 63303

Title: Anderson-Fabry disease presenting with atrial fibrillation as earlier sign in a young patient: A case report and review of literature

Reviewer's code: 05467044

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

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Reviewer chosen by: AI Technique

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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 Grade E: Do not publish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
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 statements	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

Anderson-Fabry disease (AFD) is an X-linked genetic disorder that arises from a mutation in the galactosidase A gene, encoding α -galactosidase A, in which cardiac manifestations are the leading cause of mortality. Nevertheless, atrial fibrillation as a presenting sign at the young age diagnosed with AFD is uncommon. So, this paper reported a rare case of AFD as a presentation with atrial fibrillation at a young age. Meanwhile, sinus conversion to detect the relationship between P and QRS may be needed and helpful in differential diagnoses of AFD. However, there are several minor problems shown as follows: 1 In the Abstract section, several abbreviations occur in the first time should be provided with the full names, for instance, LVH and GLA. 2 The microalbuminuria of the patient was 17.6 mg/day (normal range 0-2.0 mg/day). If this factor is correlated with AFD? Necessary discussion of the elevated microalbuminuria should be added into the part of discussion.