

PEER-REVIEW REPORT

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Title: Management of an intracranial hypotension patient with diplopia as the primary symptom: a case report and literature review

Reviewer's code: 03999836

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Czech Republic

Author's Country/Territory: China

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Reviewer chosen by: AI Technique

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input 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 Grade E: Do not publish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 statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

I highly appreciate the difficult and frequently overlooked topic – intracranial hypotension, which is of interest not only for neurosurgeons, but also for neurology, anaesthesia and pain management specialist. In general the Abstract is well written and although the authors provided a certificate confirming language correction (and the reviewer is not a native speaker of English language), some phrases may be re-checked – diplopia in his left eye for one ... (does it mean that the patient suffered from diplopia on the left side – or when his right eye was closed?). The term neurotrophic treatment (used in the abstract) should be at least briefly specified even in the abstract – particularly in the presence of bilateral SDHs with brainshift. In the part Conclusions (Abstract) there is a small spelling error – biliteral (probably bilateral). The part Core tip is well written and points out correctly the main message of the paper. The part Imaging examination – I understand that the patient was referred to Neurosurgery department, however I am lacking the details of neurosurgical treatment (he was not operated on – the right sided subdural haematoma is not small and there is a midline shift), although this problem is partially addressed in Discussion section. In this part I also suggest to move the part starting On day 21, follow up CT ----- and ending ----- day 57 and showed no evident CSF leakage. t Outcome and follow up part. of the paper.

The Discussion is well written and the presentation of similar cases in the form of a Table is adequate, although one spelling error can be found (tans imp – probably transient improved – language correction – transiently improved may sound better). Anyway the paper deals with important topic, has a didactic value and after minor corrections it can be recommended for publication.