

## PEER-REVIEW REPORT

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

**Manuscript NO:** 70835

**Title:** Early diagnosis of Gitelman syndrome in a young child; A Taiwanese family study case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 05219083

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Doctor, Professor, Surgeon

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

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

**Manuscript submission date:** 2021-08-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-07 22:00

**Reviewer performed review:** 2021-09-13 18:45

**Review time:** 5 Days and 20 Hours

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 Grade E: Do not publish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 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous
	Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No

## SPECIFIC COMMENTS TO AUTHORS

Reviewer Comments and Suggestions for Authors Criteria Checklist for New

Manuscript Peer-Review

1 Title. Does the title reflect the main subject/hypothesis of the manuscript? ANSWER: No. I suggest the authors adapt the title, as follows: Gitelman syndrome, diagnosis in an infant: case report and family study.

2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? ANSWER: Yes.

3 Key words. Do the key words reflect the focus of the manuscript? ANSWER: No. I suggest that the authors delete the term vomiting and add hypomagnesemia.

4 Background. Does the manuscript adequately describe the background, present status and significance of the study? Answer: Yes.

5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? ANSWER: This does not apply.

6 Results. Are the research objectives achieved by the experiments used in this study? ANSWER: This does not apply. What are the contributions that the study has made for research progress in this field? ANSWER: None.

7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? ANSWER: Yes. Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? ANSWER: Yes. Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? ANSWER: Yes.

8 Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? ANSWER: No. Table 1. I suggest that the authors include in the table only the key laboratory results in the diagnosis and the rest of the values include them in the Case



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Report section. Figure 1. I suggest that the authors increase the size of the text, it contains text with a very small font. Do figures require labeling with arrows, asterisks etc., better legends? ANSWER: No. Increase the size of some legends, there is text in very small type.

9 Biostatistics. Does the manuscript meet the requirements of biostatistics? ANSWER: This does not apply.

10 Units. Does the manuscript meet the requirements of use of SI units? ANSWER: Yes.

11 References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? ANSWER: Yes. I only suggest authors to complete the writing of all references, example, Reference 1. Cummings BM, Macklin EA, Yager PH, Sharma A, Noviski N. Potassium abnormalities in a pediatric intensive care unit: frequency and severity. J Intensive Care Med 2014; 29 (5): 269-74. [PMID: 23753253] [10.1177 / 0885066613491708]

Does the author self-cite, omit, incorrectly cite and/or over-cite references? ANSWER: No.

12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? ANSWER: Yes. Is the style, language and grammar accurate and appropriate? ANSWER: Yes.

13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and reporting? ANSWER: Yes.

14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of



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ethics? ANSWER: Yes. Manuscript Peer-Review Specific Comments To Authors:\* Please make your specific comments/suggestions to authors based on the above-listed criteria checklist for new manuscript peer-review and the below-listed criteria for comments on writing. The criteria for writing comments include the following three features: First, what are the original findings of this manuscript? ANSWER: None. What are the new hypotheses that this study proposed? ANSWER: None. What are the new phenomena that were found through experiments in this study? ANSWER: This does not apply. What are the hypotheses that were confirmed through experiments in this study? ANSWER: This does not apply. Second, what are the quality and importance of this manuscript? ANSWER: In general terms, the quality of the manuscript as a Case Report is good, with the importance that the authors present a clinical case of a genetic disease where they make the early diagnosis and also base it on the family study. What are the new findings of this study? ANSWER: None. What are the new concepts that this study proposes? ANSWER: None. What are the new methods that this study proposed? ANSWER: None. Do the conclusions appropriately summarize the data that this study provided? ANSWER: Yes. What are the unique insights that this study presented? ANSWER: None. What are the key problems in this field that this study has solved? ANSWER: None. Third, what are the limitations of the study and its findings? ANSWER: It is just a clinical case. What are the future directions of the topic described in this manuscript? ANSWER: None. What are the questions/issues that remain to be solved? ANSWER: The authors do not ask any questions. What are the questions that this study prompts for the authors to do next? ANSWER: None. How might this publication impact basic science and/or clinical practice? ANSWER: in clinical practice, promote early detection of Gitelman Syndrome to initiate appropriate treatment and prevent patients from having life-threatening complications.

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**Peer-review model:** Single blind

**Reviewer's code:** 03700188

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor, Attending Doctor

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

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

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**Reviewer chosen by:** AI Technique

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**Review time:** 1 Day and 17 Hours

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 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 type="checkbox"/> Yes <input checked="" 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
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**SPECIFIC COMMENTS TO AUTHORS**

The case report is important in cases of rare diseases and facilitates the study and understanding of the pathology for pediatricians and general practitioners. But it's important to mention a few more relevant articles as "Fujimura J, Nozu K, Yamamura T, et al. Clinical and Genetic Characteristics in Patients With Gitelman Syndrome. *Kidney Int Rep.* 2018;4(1):119-125. Published 2018 Sep 28. doi:10.1016/j.ekir.2018.09.015".

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**Peer-review model:** Single blind

**Reviewer's code:** 05845795

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Research Fellow

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

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

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-15 11:13

**Reviewer performed review:** 2021-09-22 18:47

**Review time:** 7 Days and 7 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No
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#### **SPECIFIC COMMENTS TO AUTHORS**

It is difficult to understand Figure B. It needs to provide a clear description for the subtitles, or add text to explain it. However, the manuscript is not written very well, it is quite difficult to understand it. In addition, there are many major concerns that need to be addressed by the authors. The clinical case that the authors present in their manuscript is interesting due to the low frequency of this genetic disease and they complement the diagnosis with the family study.



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**Peer-review model:** Single blind

**Reviewer's code:** 05334153

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Assistant Professor

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

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

**Manuscript submission date:** 2021-08-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-19 15:35

**Reviewer performed review:** 2021-09-26 03:45

**Review time:** 6 Days and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<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

Specific comments to authors: Wu and co-others report on Gitelman syndrome presenting in a young toddler. The manuscript is of clinical interest, although the authors need to address some points as follows. Major comments: - The authors mentioned in the title that Gitelman syndrome in their case is complicated with acute gastroenteritis. I strongly oppose this statement. Mostly the index case has an incidental gastroenteritis that by chance led to the accidental observation of persistent hypokalemia then further investigations revealed Gitelman syndrome. But there is no evidence that the gastroenteritis is related to Gitelman syndrome. You mentioned that the patients was previously healthy, she had generalized weakness during the attack of gastroenteritis which is expected. Did this weakness improved after the resolution of gastroenteritis? Then this weakness is not related to the Gitelman syndrome as the authors report. Accordingly, I suggest changing the title of the manuscript to "Early diagnosis of Gitelman syndrome in a young child; A Taiwanese family study case report". In the abstract and the manuscript mention that how the disease was accidentally discovered after gastroenteritis. In the introduction you need to mention Bartter syndrome as the most common differential diagnosis of Gitelman syndrome and it is even more common to present in the age group of your index case. In the discussion, you mentioned that measurement of urinary calcium excretion could help differentiate between Bartter and Gitelman syndrome. Elevated renin and aldosterone in Bartter syndrome is another important differentiating point that should be added. - The authors need to clarify some clinical data about their patients. Did the patients have any history of salt craving or tetany? Did they have any motor developmental delay? Especially in the young



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toddler that you mentioned she has generalized weakness. What about their growth parameters? What was their blood pressure? Usually patients with Gitelman syndrome are hypotensive. Did their clinical examination showed chondrocalcinosis, which could be found in these patients? - It is quit strange that the parents are non-consanguineous as shown in figure 1 and they have 3 affected siblings with an autosomal recessive disease.

- You mentioned that you treated your patients with long-term potassium supplementation. In Gitelman syndrome, magnesium supplementation with either magnesium oxide or magnesium sulfate should be added as well.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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

**Manuscript NO:** 70835

**Title:** Early diagnosis of Gitelman syndrome in a young child; A Taiwanese family study case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 05334153

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Assistant Professor

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

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

**Manuscript submission date:** 2021-08-23

**Reviewer chosen by:** Yu-Jie Ma

**Reviewer accepted review:** 2021-12-17 13:10

**Reviewer performed review:** 2021-12-18 14:25

**Review time:** 1 Day and 1 Hour

<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>Peer-reviewer</b>	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



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statements

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

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

No other comments