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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 71491

Title: Anesthetic management of a patient with CCFDN syndrome for posterior scoliosis:

A case report of first published intubation

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00526025 Position: Editorial Board Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Czech Republic

Manuscript submission date: 2021-09-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-01 06:45

Reviewer performed review: 2021-10-09 05:13

Review time: 7 Days and 22 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

You reported anesthetic management of a 13-year-old girl with congenital cataract, facial dysmorphism, and neuropathy (CCFDN) syndrome. You claimed that the child was the first to be managed with tracheal intubation. The report is valuable for anesthesiologists. The manuscript needs amendment. General comments: You should state precise clinical features of CCFDN syndrome. It is important for anesthesiologists to know triggering events of rhabdomyolysis and the onset of facial dysmorphism, since they are very important to choose anesthetic method and agents. Abstract Are rhabdomyolysis and seizure in CCFDN syndrome related to anesthetic management? Are they triggered by anesthetic agents? Was the tracheal intubation easy or not? Introduction The descriptions of lines 7 to 17 (CCFDN syndrome has... progression of the curve. (8-12)) should be moved to discussion section. Case presentation History of present illness: The sentence on pulmonary function test should be moved to "Laboratory examination" Personal and family history: You should state the presence or absence of previous rhabdomyolysis, seizure, or person(s) with CCFDN syndrome. Physical examination: You should delete the result of pulmonary function test. Treatment Anesthetic management: You stated anesthetic management in one paragraph. It is extremely important to make proper paragraphing. Did the child develop perioperative rhabdomyolysis and/or seizure? Discussion I would recommend that you state clinical and genetic features of CCFDN syndrome in the first paragraph, potential anesthetic problems related to CCFDN syndrome in the second paragraph, and discussions on anesthetic management of each potential anesthetic problem in the third paragraph. And, you should state your conclusion in the fourth paragraph. **END**