Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
**Telephone:** +1-925-399-1568
**E-mail:** bpgoffice@wjgnet.com
**https**://www.wjgnet.com

# PEER-REVIEW REPORT

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

**Manuscript NO:** 69237

**Title:** Novel α-galactosidase A gene mutation in a Chinese Fabry disease family: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 03366151
**Position:** Peer Reviewer
**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-06-22

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-06 16:09

**Reviewer performed review:** 2021-07-16 07:45

**Review time:** 9 Days and 15 Hours

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[ ] Grade D: Fair [ ] Grade E: Do not publish |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

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
**Telephone:** +1-925-399-1568
**E-mail:** bpgoffice@wjgnet.com
**https**://www.wjgnet.com

| | |
|---|---|
| **Peer-reviewer statements** | Peer-Review: [ Y] Anonymous [ ] Onymous<br>Conflicts-of-Interest: [ ] Yes [ Y] No |

**SPECIFIC COMMENTS TO AUTHORS**

In this manuscript Fu et al. report on a novel α-galactosidase A gene mutation (348delG:p.G116fs) in exon 2 in a Chinese Fabry disease family. This is an interesting, clearly written paper. Minor comments The authors should underscore the delay for diagnosis and point out that a lysosomal storage disease should have been suspected years ago in the presence of cardiac hypertrophy, arrhythmias, and renal involvement. Family history (two close relatives with same heart disorder) should have reinforced the suspicion of a genetic nature of disease. Table 1shows that the proband and her 52 years old sister had a normal (<10 mm) thickness of left ventricular (LV) posterior wall in spite of an increased thickness of interventricular septum (16 mm and 15.8 mm, respectively). Thinning of LV posterior wall is a feature of Fabry related cardiomyopathy in the late stage. The authors could address this point in discussion. Please use a galactosidase-α and a galactosidase -β instead of agluberase-α and agluberase-β, on page 11. As concerning proband's son, there is discrepancy between the value of LV posterior wall reported in the text and that shown in table 1. Please check and amend.