

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 13034

Title: Prolonged hypernatremia triggered by hyperglycemic hyperosmolar state with coma

Reviewer's code: 00503252

Reviewer's country: Japan

Science editor: Yue-Li Tian

Date sent for review: 2014-08-02 13:09

Date reviewed: 2014-09-06 11:47

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This reviewer thinks that it is worth sharing this case with "prolonged hypernatremia triggered by hyperglycemic hyperosmolar state after discontinuation of lithium therapy" by physicians. For a better understanding, discuss as to how long NDI was prolonged in reported cases after discontinuation of lithium therapy. "MATERIAL AND METHODS" (P4) should be "MATERIAL AND METHODS". "mgdL" (P5, L4) should be "mg/dL".

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 13034

Title: Prolonged hypernatremia triggered by hyperglycemic hyperosmolar state with coma

Reviewer's code: 00503204

Reviewer's country: Greece

Science editor: Yue-Li Tian

Date sent for review: 2014-08-02 13:09

Date reviewed: 2014-09-28 12:53

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a very interesting case report that I would recommend publication in the World Journal of Nephrology. The clinical significance of this case report is based on its illustration of the following points about lithium-induced nephrogenic diabetes insipidus: This condition may persist for years after cessation of lithium therapy; it may remain undiagnosed for long periods, probably because the renal concentrating defect is not complete, as in cases of congenital nephrogenic diabetes insipidus, and therefore hypernatremia can be prevented by modest increases in water intake as long as the patients are able to quench their thirst; However, this condition can cause severe hypernatremia during disease episodes that prevent the patients from ingesting adequate fluid volumes. This last development, which had been previously described in post-operative states, can also follow severe hyperglycemic episodes causing coma, as shown by the patient presented in this report. The documentation of the sequences presented above and of the diagnosis of nephrogenic diabetes insipidus in this report was appropriate. Kosmas I. Paraskevas, MD

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 13034

Title: Prolonged hypernatremia triggered by hyperglycemic hyperosmolar state with coma

Reviewer's code: 00503228

Reviewer's country: Iraq

Science editor: Yue-Li Tian

Date sent for review: 2014-08-02 13:09

Date reviewed: 2014-09-26 21:05

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

- Good case report; but the title might be better if you add ": A case report" to it. - You wrote about a diagnosis of SCC but talking no more about (Metastasis, any therapy, ...) - It would be nice if you add a table of the initial data of your case, and a figure to show how important values (e.g. Na, Glycemia, K, ...) got changed. - Materials & methods section in a case report is not conventional; - What were you advices to the patient before discharge?