

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 23167

**Title:** Diagnosis of osteopetrosis in bilateral congenital aural atresia: Turning point in treatment strategy

**Reviewer's code:** 00503663

**Reviewer's country:** Japan

**Science editor:** Shui Qiu

**Date sent for review:** 2015-11-02 17:45

**Date reviewed:** 2015-11-25 12:03

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google 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 type="checkbox"/> Plagiarism	<input 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 report is very unique. I also confirmed that there have been no reports of bilateral congenital aural atresia with osteopetrosis. #1 What is the meaning of "turning point in treatment strategy" in the title? #2 Bone anchored hearing aids (BAHA) may be a choice for the treatment unless there was profound sensorineural hearing loss. How was her hearing level? Could she understand loud speech? How did authors estimate her hearing level? #3 Authors described the existence of congenital cholesteatoma (not granuloma) in CT. Is it probable to have intracranial complications due to the cholesteatoma in future?

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**Title:** Diagnosis of osteopetrosis in bilateral congenital aural atresia: Turning point in treatment strategy

**Reviewer's code:** 00503689

**Reviewer's country:** Egypt

**Science editor:** Shui Qiu

**Date sent for review:** 2015-11-02 17:45

**Date reviewed:** 2015-11-27 20:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" 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

Nice case report. However there are some comments on the interpretation of the CT scan lime the erosion of the ossicles or the possibility of a comngeniutal cholesteatoma. I think that the middle ear space is filled with fluid and mesenchymal tissue as is usual with aural atresia. The ossicles are malformed rather than eroded and the tegmen is not eroded its the bone configuration. I wouldn't suggest a BAHA maybe a softban option as the cost of a BAHA and the surgery would be prohibitive especially that she will eventually have a profound HL due to the barrowing of the IAM. However some sort of auditory stimulation is mandatrory due to the proggressive handicaps in hearing and vision.

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**ESPS manuscript NO:** 23167

**Title:** Diagnosis of osteopetrosis in bilateral congenital aural atresia: Turning point in treatment strategy

**Reviewer's code:** 00503686

**Reviewer's country:** Egypt

**Science editor:** Shui Qiu

**Date sent for review:** 2015-11-02 17:45

**Date reviewed:** 2015-11-29 02:01

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google 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 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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input 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 type="checkbox"/> No	

## COMMENTS TO AUTHORS

The article is well-written . however, I have three concerns: 1- On googling "microtia+sclerosing skeletal dysplasia" I got an article published in 2012 in the Europial Journal of Human genetics .... The article describes microtia and aural atresia together with skeletal dysplasia : <http://www.nature.com/ejhg/journal/v20/n10/full/ejhg201257a.html>. 2- You based your opinion about the { increased bone density} on only viewing the radiological findings inspite of normal level Calcium and Phosphates.... I am not a radioloigist but I think we'd better have some other evidences (biochemical) to diagnose bone density more confidently. 3- It is unclear what made you decide to have complete bone scan for the child??

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

**ESPS manuscript NO:** 23167

**Title:** Diagnosis of osteopetrosis in bilateral congenital aural atresia: Turning point in treatment strategy

**Reviewer's code:** 00503695

**Reviewer's country:** Germany

**Science editor:** Shui Qiu

**Date sent for review:** 2015-11-02 17:45

**Date reviewed:** 2015-12-02 17:02

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google 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
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		BPG Search:	
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Dear Ladies and Gentlemen, the manuscript describes a case of osteopetrosis in bilateral congenital aural atresia, its diagnosis and the impact on the treatment plan. The case report needs revision and language polishing before publication. 1. Please change keywords to 'Congenital hearing loss; 2. Introduction, line 5: Change to 'Treacher Collins syndrome, Branchio-oto-renal syndrome'; 3. Discussion, page 2, line 8: precise 'ADOP is relatively commoner than AROP'; 4. Discussion, page 3, line 2: the abbreviation SNHL is not explained; Table 4: the abbreviation EMH is not explained; 5. Discussion, page 3, line 12: Change to 'Jahrsdoerfer'; 6. Discussion, page 3, line 17: the authors state that the deafness is due to a narrowing to the foramina: Which foramina are meant? 7. The authors state that additional choleateatoma of the right side was suggested: Was it operated? What was the management plan? 8. Reference 3: add pages; 9. Check reference 10 for accuracy; Please correct following typing and grammatical errors: a) Abstract, line 11: change to 'in the management plan'; articles have to be added through the whole manuscript; b) Case report, line 3: change to 'had a severely deformed pinna bilaterally; check spacing in this line and in line 16; c) Case report, line 14:

change to 'Eustachian tube block'; d) Case report, page 2, line 1: change to 'both internal auditory canals'; e) Case Report, page 2, line 11-14: check biochemical workup for capital letters; Discussion, page 3, line 1: check for capital letters; f) Discussion, line 6: change to 'starts at week six of pregnancy'; g) Discussion, line 7: change to 'is completed by week 20'; h) Discussion line 14: What is meant with 'palate?'; i) Discussion , line 15: change to 'Sclerosing skeletal dysplasia like osteopetrosis can cause bony EAC narrowing by bone involvement, whereas the deformity of the pinnae can not be explained'; j) Discussion, page 3, line 6: change to 'form'; k) Discussion, page 4, line 14: change to 'the pinnae and for a bone anchored hearing aid (BAHA)'; l) Discussion, page 4, line 16: change to 'was lost to follow up'; m) Discussion, line four from the bottom: change to 'etiological cause'; n) Figure 1: change to 'pinnae' and 'also seen are'; o) Figure 2: change to 'both middle ears'; p) Figure 3: change to 'a normal cochlea and vestibule in both ears'; Sincerely,