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PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 65282

Title: A patient with SERPIN rs2227589 polymorphism found to have multiple cerebral venous sinus thromboses despite a normal antithrombin level: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06006212
Position: Peer Reviewer
Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-03-23

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2021-07-28 09:34

Reviewer performed review: 2021-07-29 00:17

Review time: 14 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] 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 statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Thank you very much for letting me contribute to this study. The authors came across the rare and significant case of CVST with minor gene mutation. Their management worked properly without severe adverse events. They also managed the patient's daughter with up-to-date knowledge as well. I believe it is very important to report these type of cases where we can know "which mutation can cause what type of symptoms and how we can manage it." However, as a case report, this manuscript lacks a clinical perspective. The patient had been suffering from headache for 10 years. Headache is one of the most common chief complaint in outpatient clinics or emergency departments. But most of the cases are not critical. Diagnosis of CVST is challenging also because they do not present typical or classical symptoms or laboratory data. In addition to the gene mutation, it would reinforce the impact of this report if they mentioned more detail of clinical courses such as "what was specifically suspicious and how they decided to perform MRI." Moreover, description of particular differences in clinical signs would be of great help to broaden our knowledge. If this gene mutation does not only cause CVST but also lead to specific symptoms, we can focus on those signs when we see patients with headache next time.