

PEER-REVIEW REPORT

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Title: Subdural fluid collection rather than meningitis contributes to hydrocephalus after cervical laminoplasty: case report and literature review

Reviewer's code: 03999836

Position: Peer Reviewer

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Reviewer chosen by: AI Technique

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The recognition and adequate treatment of complications is one of the most important arts not only in neurosurgery, but also in the whole medicine. Moreover in this time period overcrowded with lawyers specialised on „ malpractice claims „ any paper daring to honestly describe an unusual complication of so called routine spinal surgery should be highly appreciated. The authors describe an unusual case of hydrocephalus following dural tear (not infrequent problem) after spinal surgery. The remarks and queries about the full text of the paper : page 5, line 8 - I suggest rearrangement of the MRI scans in time axis. After the presentation of Fig1 A the authors immediately proceed to Fig. 2 A - logical because of the problems of the patients, but not so comfortable for the reader (and a reviewer because of the need to skip fro one set of images to another) page 5, lines 10 - 13 - in the differential diagnostic workup in the situation of the patient's deterioration on the 10th day after operation (high fever ,WBC: $13.22 \times 10^9/L$; neutrophil, $10.42 \times 10^9/L$; CRP: 18.55mg/L; ESR: 37mm/h) cervical MRI was surely not the first choice exam. I would appreciate the description of the local status of the wound, the presence /absence of neurological symptoms accompanying the situation (meningeal syndrome, worsening of radicular or myelopathic symptoms) and the results of other exams that have led the primary surgeons to the diagnosis of postoperative pseudocyst meningitis (high level of protein and WBC count in the pseudocyst fluid is a normal finding). However the primary treatment was done in another hospital so a short notice e.g. about not availability of such data would be quite acceptable. page 6, line 16 - page 7, line 16- as already stated above I strongly suggest the rearrangement of the MRI / CT in thie axis reflecting the course of the treatment . It is difficult for the reader to skip from e.g Figure 3C and 3D (line 8) back again to Fig. 1J (line 14). However the treatment course is otherwise well described. page 8, line 4 - the results of CSF tests are

not necessary for the cases of obstructive hydrocephalus quoted by the authors (compressive effect of subdural fluid collection or cerebellar enlargement due to cerebellar hemorrhage, obstruction of clot formation following brisk bleeding entering subarachnoid space and ventricle system) , therefore I suggest removing the sentence Unfortunately, these cases did not mention the results of CSF tests. page 8, line 16 - the spelling error - lesion page 8 - lines 20 - 21 - At 21 months follow-up, the patient still had asymptomatic meningitis (Table 1)..... . Is the patient receiving any long term antibiotic treatment ? page 15 - description of Fig 1. E and F: the sentence Sagittal and axial view of cervical MRI before pseudomeningocele is not eligible to the reviewer (probable meaning something like Sagittal and axial view of cervical cervical spine after laminoplasty in front of the pseudomeningocele) and I suggest reformulation . .. Abstract Regarding the Background - although the reviewer is not a native speaker of English language and the paper has undergone language correction the sentence This case report presented a patient with hydrocephalus accompanied by both subdural fluid collection and chronic meningitis after cervical laminoplasty for the first time. is not quite easy to read and comprehend and therefore reformulation may be considered. Finally the authors should be congratulated for the treatment outcome in this difficult case (and avoidance of unnecessary and potentially contraproductive ventriculoperitoneal shunting) and after the correction of some small problems mentioned above and checking for spelling error I will gladly recommend their paper for publication for its educational and also practical - applied scientific value. Please consider rearrangements of the well selected scans in logical time line.