

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 5301

Title: Heat Stroke Induced Cerebellar Dysfunction: A “Forgotten Syndrome”

Reviewer code: 00731487

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-28 15:24

Date reviewed: 2013-09-01 00:31

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

1. "severe dehydration" - which clinical or chemical findings to state this? 2. "and was transferred for rehabilitation" - further outcome? 3. Internal basic-examination results i.e. blood pressure, Cor et Pulmo auscultation etc. is absolutely missing during first administration. 4. Temperature 38.0 - how administered? rectal? 5. No clear correlation between the patients temperatures and clinical presentation of cerebellar dysfunction. 6. Any therapeutical approaches like f.e. highly dosed steroids intravenously etc. (ex juvantibus therapies)? If not, why not?

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Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 5301

Title: Heat Stroke Induced Cerebellar Dysfunction: A “Forgotten Syndrome”

Reviewer code: 00502992

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-28 15:24

Date reviewed: 2013-09-01 08:53

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In the case report, the authors claim that heat stroke induced cerebellar damage is a rare and challenging neurological problem because the cerebellum is vulnerable to high temperature which may cause irreversible cell damage with permanent disability. Comments 1. Detailed biochemistry data such as liver enzymes, renal function test (including urinalysis), CPK, uric acid, and LDH etc. should be provided. 2. The patient comorbidity and medication history should mention. Were there any exercise or exertion history. 3. In “Discussion” section, classic heat stroke and exertional heat stroke should be discussed.