



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 84890

Title: Persistent dysexecutive syndrome after pneumococcal meningitis complicated by recurrent ischemic strokes: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02840633

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2023-04-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-04-30 03:17

Reviewer performed review: 2023-05-08 13:49

Review time: 8 Days and 10 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This case report described a patient with severe cognitive sequelae, after bacterial meningitis and, consistent with the anatomical contiguity, prevalent damage in the frontal lobe, and consequently in executive functions and behavior control. This study highlighted some of the clinical and neuropsychological features of bacterial meningitis with cerebrovascular complications to improve diagnosis and potentially promote better outcomes.



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Reviewer's code: 05291028

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: Italy

Manuscript submission date: 2023-04-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-05-23 08:01

Reviewer performed review: 2023-05-23 10:13

Review time: 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" 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 checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors present the case of a 32-year-old female patient with extensive pneumococcal meningitis, with a sinus outbreak complicated by candidemia. She presented with extensive laminar ischemic damage in the acute phase, leading to severe cognitive and behavioral impairment. Recurrent ischemic strokes and severe cognitive impairment (executive functions and behavior control) were observed during the four years following onset. This report is potentially interesting, but the manuscript can be improved according to the following suggestions:

1. In the Discussion section, a comment should be added with a clear remark that a serious complication of infections affecting the central nervous system (by endocarditis or meningitis) is cerebral ischemia. Ischemic stroke secondary to infection (infective endocarditis, meningitis, etc) is rare in adults and was observed in 11 patients in a series of 70 cases (15%) in a clinical study of ischemic stroke of unusual cause (Eur J Neurol 2001; 8: 133-139). The inclusion and comment on this reference is recommended.
2. Acute stroke may also be a manifestation or complication of hematologic disease in young patients. This is a noteworthy clinical aspect that should also be emphasized in the text (Expert Rev



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Hematol 2016; 9: 891-901). Did the authors consider this in their study protocol? 3. It would be advisable for the authors to comment in the text on the differential diagnosis of acute stroke in young people. 4. It is essential to point out the results and data obtained from neuroimaging (brain CT and /or MRI). 5. It would be interesting to know if antithrombotic medication was administered to the patient and at what dose. 6. It would be interesting if the authors included in the text some of the limitations of this study.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 05291028

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: Italy

Manuscript submission date: 2023-04-24

Reviewer chosen by: Xin-Liang Qu

Reviewer accepted review: 2023-06-12 05:41

Reviewer performed review: 2023-06-12 05:52

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I thank the authors for addressing the issues in my initial review. I am satisfied with the additional sentences added to the manuscript and have no additional suggestions to make.