

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 87616

Title: Sneddon's syndrome concurrent with cerebral venous sinus thrombosis: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06011774

Position: Peer Reviewer

Academic degree: MBBS, MMed

Professional title: Doctor

Reviewer's Country/Territory: Malaysia

Author's Country/Territory: China

Manuscript submission date: 2023-08-20

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-09-29 04:21

Reviewer performed review: 2023-10-09 15:28

Review time: 10 Days and 11 Hours

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 Grade E: Do not publish
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 type="checkbox"/> Grade B: Good <input checked="" 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 checked="" 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 checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Thank you for the opportunity to review this manuscript. It is very well written, and I learned from this case illustration. I would like to point out a few things that may help improve the article. The abstract is slightly long-winded (especially the background) and can be improved to be more focused by only leaving points illustrating the case. The case presentation does not require headings like the history of presenting illness, diagnosis, treatment, etc. and can be separated as paragraphs like other published case reports. Also, important clinical history, if present, like a history of mental disorders like depression and anxiety, if she is married, has she had a problem conceiving, etc. which are relevant issues in this syndrome. Contradictory findings were presented in which the muscle strength was documented to be normal, but subsequently, the power was mentioned as grade 3 or 4 instead of 5. Unless the author meant muscle bulk appears normal. If possible, abnormal findings of the images should be labelled. Repetition on the point of antibiotics under the treatment heading. The references used in the discussion should be cited; there were none for the first few paragraphs. Otherwise, the discussion is fairly comprehensive and explains the clinical syndrome well. Although I



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
<https://www.wjgnet.com>

prefer if the discussion is focused on the patient and her presentation and not in general as expected in a case report, I can understand the author's point of trying to raise awareness on such a rare disease. Usually, we refrain from adding additional references in the conclusion. It should be a closing statement or take-home message in this case. Anything new should be introduced in the discussion. In the references, several references needed to be portrayed fully (eg. Missing volume/pg number like 9, 11) and repeated twice in 12, 13. Please recheck the references and make the necessary corrections.