

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**ESPS manuscript NO:** 11412

**Title:** A case of cannabinoid hyperemesis syndrome with a long-term follow-up

**Reviewer code:** 00646580

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-05-20 21:22

**Date reviewed:** 2014-05-21 00:45

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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 type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

Interesting case report article. Major concern is the total absence of the cannabinoid neuropharmacology related to the case report on the introduction and the almost total absence of cannabinoid mechanisms of action related to the case report on the discussion. Saying "Most cannabinoids act through two receptors, CB1 and CB2, which act by reducing anterior pituitary hormone and increasing corticotropin release.[15]" is an over simplification of cannabinoid mechanisms of action related to the case report (for both hyperemesis and and thermoregulation) and need to be properly addressed. Not sure I understood the text on discussion "... in patients who are not determined to get better." Can authors clarify what they mean with that? Minor: Needs updated references on first paragraph of the introduction and review the text as is lacking spaces between words.

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**ESPS manuscript NO:** 11412

**Title:** A case of cannabinoid hyperemesis syndrome with a long-term follow-up

**Reviewer code:** 01916882

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-05-20 21:22

**Date reviewed:** 2014-06-06 01:06

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"/> Existing	<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	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

The manuscript on this clinical case of cannabinoid hyperemesis syndrome (CHS) is a general description of such case that largely overlaps with previous reports on CHS. For this reviewer it is surprising the absolute absence of data or figures to support the description of the CHS case. Whereas no doubt it is important to raise the awareness of clinicians of potential CHS cases, the structure of the manuscript would be more on the kind of "Comment" or "Point of view" or similar opinion articles. Specifically some points that recall my attention are the following. CHS apparently is largely defined by the fact that chronic cannabinoid users that develop abdominal pain and hot water showering behavior and both are relieved by cannabis cessation. It is important to better understand the CHS to correlate changes of cannabinoid metabolites (blood/urine) when diagnosed and their evolution according to cessation and symptom disappearance. It is not clear the importance of long-term cannabis cessation (stated 9 years) if CHS symptoms stop early after cessation. Minor comment. Introduction. Cannabis is the most illegal recreational drug used. Other legal recreational drugs have higher rates of consumption e.g. tobacco and alcohol.

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**ESPS manuscript NO:** 11412

**Title:** A case of cannabinoid hyperemesis syndrome with a long-term follow-up

**Reviewer code:** 02810395

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-05-20 21:22

**Date reviewed:** 2014-06-24 00:33

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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 type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

### COMMENTS TO AUTHORS

This very written clinical case of cannabinoid hyperemesis syndrome (CHS) by Cha et al. presents evidence that CHS is easily diagnosed with characteristic clinical features and excellent prognosis can be achieved with cannabinoid abstinence. These findings are significant given the recent increase in recreational and medical use of marijuana in the USA. I only have one comment. It is stated that the 44-year old man presented with a "long history of addiction to marijuana". More detail needs to be presented to define what is meant in this case of addiction to marijuana. In other words, how many times a day, times per week or times per month did this patient use marijuana and for how long? In addition, how long did the patient use marijuana before developing CHS?

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**ESPS manuscript NO:** 11412

**Title:** A case of cannabinoid hyperemesis syndrome with a long-term follow-up

**Reviewer code:** 00504526

**Science editor:** Ling-Ling Wen

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**Date reviewed:** 2014-07-01 17:52

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"/> Existing	<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	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

This is an interesting case study of cannabinoid hyperemesis syndrome, which is characterized by chronic, heavy use of cannabis, recurrent episodes of severe nausea and intractable vomiting, and abdominal pain. Overall, the paper is well written. I have only a minor comment: Cannabis is known for its antiemetic properties. Why such a substance should cause such a syndrome? Please give some possible explanations in the discussion.