

## PEER-REVIEW REPORT

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

**Manuscript NO:** 59044

**Title:** Hemorrhagic fever with renal syndrome complicated with aortic dissection: A case report

**Reviewer's code:** 03601609

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-08-21

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-08-24 07:04

**Reviewer performed review:** 2020-08-24 12:22

**Review time:** 5 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**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

## **SPECIFIC COMMENTS TO AUTHORS**

Authors described a case of hemorrhagic fever with renal syndrome with concurrent aortic dissection. This case is very interesting because it is the first case reported in literature. Nevertheless, there are some revisions that should be made. Authors should revise the manuscript according to the "Format for Manuscript Submission". They should also revise abbreviations. In general, terms should not be abbreviated unless they are used two times or more and the abbreviation is helpful to the reader. Introduction, page 4, lines 73-75: the sentence should be moved in the discussion section. Case presentation, page 5, line 102: Authors stated "Enzyme-linked immunosorbent assays (ELISA) of IgM and IgG antibodies for HFRS were both positive and the serotype was hantaan virus". I think they should restate the sentence without cite HFRS because this is the disease they diagnosed thereafter. Case presentation, page 7, line 120-125: Authors should better describe treatment with the right timing. Discussion: Authors should explain better why they did not evaluate the serotype of the virus and describe the different existing serotype. It is known that "The morbidity of HFRS is very low, and its mortality rate is from 0.43%-15%, depending on the strain of the virus. The strains causing mild disease are Puumala and Saamaraa mortality rates of <1%, moderate disease Seoul, and those causing severe disease are Dobrava, Amur, and Hantaan with mortality rates of 5% to 15%." (please see Garanina E, et al. Cytokine Storm Combined with Humoral Immune Response Defect in Fatal Hemorrhagic Fever with Renal Syndrome Case, Tatarstan, Russia. *Viruses* 2019;11(7). Chandy S, Mathai D. Globally emerging hantaviruses: An overview. *Indian J Med Microbiol* 2017;35(2):165-175. Avšič-Županc T, et al. Hantavirus infections. *Clin Microbiol Infect* 2019;21S: e6-e16.) Conclusion: Authors should re-write it according to the revisions. On the basis of the ongoing effort of Worrrld Journal of Clinical Cases to increase its impact this manuscript

can not be accepted without further revisions.