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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 4868
Title: Family case of achalasia cardia (case report and review of literature)
Reviewer code: 00058345
Science editor: Wang, Jin-Lei
Date sent for review: 2013-07-29 14:24
Date reviewed: 2013-08-05 15:35

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

The authors report a case of manometrically proven achalasia in a daughter, radiologically probable achalasia in mother and suspected (from history) achalasia in a grand-mother. In absence of genetic analysis of the subjects, the authors leap to the conclusion that this is Xlinked hereditary form of achalasia which is unsubstantiated by any of the evidence that they present. At the most, one can accept it as a form of familial presentation of a disease, with possible genetic influence. There is nothing new about the investigation or management of these cases to make the manuscript unique.

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Science editor: Wang, Jin-Lei
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Date reviewed: 2013-08-08 19:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
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[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[Y]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[ ] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

Evsyutina and associates present a case report detailing two patients (mother and daughter) with achalasia. The authors imply that this represents an X-linked dominant pattern of inheritance. A review of the literature is provided regarding genetic polymorphysms and syndromes associated with achalasia. 1.)How do we know that this is truly an inherited condition without a more extended family pedigree? 2.) For Patient A, it is stated that the patient refused the proposed therapy. What was the proposed therapy in this case? 3.) Though the familial relationship suggests a vertical transmission pattern of achalasia, no data is provided in the form of genetic testing that identifies a specific abnormality or polymorphism. There is no specific data presented that can confirm an x-linked expression pattern with only two patients affected.