

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 28953

Title: Posterior reversible encephalopathy syndrome in alcoholic hepatitis: Hepatic encephalopathy a common theme

Reviewer's code: 03536581

Reviewer's country: Qatar

Science editor: Jing Yu

Date sent for review: 2016-07-25 12:31

Date reviewed: 2016-08-03 16:08

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

In the current case report authors trying to explain the PRES with the help of imaging and biochemical test and suggesting that ammonia could be the main factor for PRES. Its nice case reported. Major issue: 1. The presented case indicates that there is acute alcoholic hepatitis with chronic liver disease, suggesting acute on chronic liver disease (ACLF). It is reported that in ACLF there is two components of cerebral edema intracellular and extracellular component not just vasogenic, please clarify? 2. I did not see the level of ammonia in the manuscript at any time point, did authors measured the ammonia level? If yes please provide the values. 3. Did authors try to measure the glutamine or glutamate levels from the PRES using proton MR spectroscopy to conform the ammonia induced changes? 4. Authors performed repeat MRI, Is there any difference between first and repeat MRI? Minor issue: 5. How authors assess the mental state, please include in the manuscript. 6. Please include the AST and ALT unit. 7. What was the grade of HE during brain MRI in both time points? 8. Please modify the Direct Bilirubin to direct bilirubin.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 28953

Title: Posterior reversible encephalopathy syndrome in alcoholic hepatitis: Hepatic encephalopathy a common theme

Reviewer's code: 03567380

Reviewer's country: United States

Science editor: Jing Yu

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The case report by John et al. describes a patient with severe alcoholic hepatitis and hepatic encephalopathy that also presents with PRES. This is the first report of PRES in a patient with alcoholic hepatitis and HE making this a novel case report. The authors describe the case well and discuss the connections between HE and PRES with what is currently known in the literature. That being said, this report could be strengthened by addressing the following concerns: 1) The authors suggest that hyperammonemia could have been a contributing factor for PRES. However, the authors do not mention serum ammonia concentrations in this case report. The authors should expand their data and report ammonia levels in the blood of this patient. This is important as patients with alcoholic hepatitis or even acute liver failure do not always develop PRES though serum ammonia concentrations are generally elevated. 2) The BMI of the patient should be reported as fatty liver could worsen the etiology of this disorder and could potentially contribute to PRES in this case. If this patient was outside the normal BMI range, the discussion should be expanded to describe this. If the patient is in the normal range, please just report the BMI. 3) Has any liver



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

histology been performed on this patient? It would be interesting to know if this patient has cirrhosis as the patient has severe alcoholic hepatitis. If this is available to the authors, please report this data as it is possible that portal hypertension could be contributing to the pathology observed in this study (which the authors already describe in their discussion) 4) There are minor wording/grammar issues that could be corrected. An example is comma splicing errors in the below sentence. Please proofread case report carefully. "This, in turn, results in endothelial dysfunction in the splanchnic and systemic, circulation (extrahepatic)"