

PEER-REVIEW REPORT

Name of journal: World Journal of Nephrology

Manuscript NO: 67170

Title: Atypical case report of Lemierre's syndrome caused by Klebsiella pneumoniae

Reviewer's code: 02845080

Position: Peer Reviewer

Academic degree: DNB, FICS, FRCS (Gen Surg), MBBS, MNAMS, MS

Professional title: Associate Professor, Director, Surgical Oncologist

Reviewer's Country/Territory: Singapore

Author's Country/Territory: South Korea

Manuscript submission date: 2021-04-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-20 03:44

Reviewer performed review: 2021-05-20 04:54

Review time: 1 Hour

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 Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input 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

Dear Authors I read with interest the case report that describes septic thrombus of IJV and bears eponym Leimerre's syndrome. The case description as well as the discussion done seems to be appropriate. The other reports describing this syndrome are also cited and discussion is appropriated done about antibiotic and anticoagulation. While in the current form the case report is fine and acceptable, may authors consider optional suggestions to enhance the educational content and value of this report. 1. Did you test for ketosis or proteinuria? I.e. did patient had diabetic ketoacidosis? or background diabetic nephropathy 2. Empirical Piptazo and Levofloxacin is to cover what bacteria? is this as per local antibiogram? 3. Clarify if ampho was switched to itraconazole - you mention itraconazole switched to amphotericin? 4. I would expect you to discuss role antibiotic stewardship teams / infection control teams in your ICU or hospital? 5. There are too many images, can reduce atleast 1 image or make it as miniature inset in other image. 6. Do you have a pathology / microscopic photo of aspergillous? if so would be good.

PEER-REVIEW REPORT

Name of journal: World Journal of Nephrology

Manuscript NO: 67170

Title: Atypical case report of Lemierre's syndrome caused by *Klebsiella pneumoniae*

Reviewer's code: 05236924

Position: Peer Reviewer

Academic degree: FACP, MD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: South Korea

Manuscript submission date: 2021-04-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-20 01:50

Reviewer performed review: 2021-05-20 04:58

Review time: 3 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
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

Authors report about critically ill patient who had K.pneumonia sepsis, presumably from pneumonia, associated with pulmonary embolism and renal vein thrombosis. Report is interesting, however I have the following concerns: 1. Lemierre's syndrome refers to combination of bacteremia and suppurative thrombosis of the vein close to the focus of infection. Typical and original syndrome (as authors mentioned) was described with pharyngitis and adjacent IJV thrombosis. Atypical Lemierre's syndrome has also been described such as liver abscess with pyelophlebitis <https://pubmed.ncbi.nlm.nih.gov/31993242/> and porto-mesenteric suppurative thrombosis due to perforated appendicitis (<https://pubmed.ncbi.nlm.nih.gov/26793462/>). presence of pneumonia and acute PE can possibly be named atypical LS, however renal vein thrombosis doesn't make much sense as it is not in the proximity of the infection. If patient had pyelonephritis than suppurative renal vein thrombosis can be argued to be part of LS. hence, I suggest the authors focus on pneumonia and PE and to remove the emphasis from renal vein thrombosis 2. Authors have not reported hypercoagulability work up. before this can be attributed to LS, basic hypercoagulability work up (factor V leided, protein C level, protein S level, APL antibodies etc) should be reported 3. Definition of LS is repetitive and it should be mentioned only once in introduction section 4. Discussion would be much more interesting if authors compare and contrast hypercoagulability properties of F. ncerophorum and K. pneumoniae as it related to pathogenesis of the syndrome. Please see above mentioned references