

1. The abstract is slightly long-winded (especially the background) and can be improved to be more focused by only leaving points illustrating the case. (already simplified the background)
2. The case presentation does not require headings like the history of presenting illness, diagnosis, treatment, etc. and can be separated as paragraphs like other published case reports. Also, important clinical history, if present, like a history of mental disorders like deprerelevant issues in this syndrome.(Mental illness and reproductive history were added to the ssion and anxiety, if she is married, has she had a problem conceiving, etc. which are personal history)
3. Contradictory findings were presented in which the muscle strength was documented to be normal, but subsequently, the power was mentioned as grade 3 or 4 instead of 5. Unless the author meant muscle bulk appears normal. (already Verified and modified)
4. If possible, abnormal findings of the images should be labelled. (already Verified and modified)
5. Repetition on the point of antibiotics under the treatment heading. (already Verified and modified)
6. The references used in the discussion should be cited; there were none for the first few paragraphs. Otherwise, the discussion is fairly comprehensive and explains the clinical syndrome well. Although I prefer if the discussion is focused on the patient and her presentation and not in general as expected in a case report, I can understand the author's point of trying to raise awareness on such a rare disease. Usually, we refrain from adding additional references in the conclusion. It should be a closing statement or take-home message in this case. Anything new should be introduced in the discussion. In the references, several references needed to be portrayed fully (eg. Missing volume/pg number like 9, 11) and repeated twice in 12, 13. Please recheck the references and make the necessary corrections. (already Verified and modified)