Reviewer's report

Title: Life-threatening hypersplenism due to idiopathic portal hypertension in early childhood: Case report and review of the literature

Version: 3 Date: 7 June 2010

Reviewer: Henry Rice

Reviewer's report:

The authors have resubmitted a revised version of a case report entitled "Life-threatening hypersplenism in early childhood: Case report and review of the literature." In its present form, there are still far too many shortcomings with this paper that limit my enthusiasm for publication of this report.

Specifically:

1) The underlying concept of this paper is that idiopathic portal hypertension is the cause of the underlying disease, rather than hypersplenism itself from other causes. In the absence of clear documentation of elevated portal pressures, this presumption remains still unclear, and therefore the overall concept of this report remains doubtful in my mind.

2) There are still far too many grammatical errors, despite being a revised submission. Several are highlighted below, but the abundance of them raises ongoing concerns.

Abstract

1) The concept of "uncontrolled splenic hyperperfusion...with subsequent hypersplenism" is not proven. As this case may simply represent hypersplenism, this should be qualified.

2) Again, hyperperfusion is not clearly demonstrated, therefore, the choice of therapies should be directed toward hypersplenism, not hyperperfusion.

Background

1) Poorly worded and structured. Should be several paragraphs, not just one. Phrases such as "amongst others" should be edited. Similarly, the word "etiopathogenesis" is new to me, and not sure what it means. A careful review by a native English speaking editor would be mandatory prior to reconsider for publication.

2) The findings of lack of overy hepatic malfunction does not, to my mind, have anything to do with congenital causes of hypersplenism as opposed to acquired causes.

Case Presentation
1) Pathogenic findings is not proper heading.

2) Again, conclusions about portal hypertension are not proven, and therefore should be qualified.

3) Decision to not measure portal pressures sounds reasonable, but it is not true that this child was "critically ill."

4) Page 6, the phrase "antibiotic-resistant septic temperatures" is unclear. Bacteremia? Fevers? Antibiotic-resistant organisms? To be published in an English journal, phrases such as this need to be clarified.

**Level of interest:** An article of limited interest

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

No competing interests