Reviewer's report

Title: Anti-hLAMP2-antibodies and dual positivity for anti-GBM and MPO-ANCA in a patient with relapsing pulmonary-renal syndrome.

Version: 1 Date: 28 January 2011

Reviewer: Alenka Vizjak

Reviewer's report:

This is a well written case report documenting a patient with relapsing pulmonary-renal syndrome and anti-GBM antibodies, MPO-ANCA and anti-hLAMP2 antibodies. It is very unusual that no linear IgG deposits along glomerular basement membrane were found despite convincingly positive anti-GBM antibodies in serum.

Major Compulsory Revisions

1. The statement that so far no reports on double-positive patient with a relapsing course of the disease have been published, as mentioned by the authors in Conclusion and some other places in the manuscript, does not hold. Some studies have been published reporting clinical relapses and reappearance of ANCA positivity in patients with coexistent anti-GBM antibodies and ANCA, similarly to typical relapsing course of ANCA vasculitis (Markowitz GS et al. An overlapping etiology of rapidly progressive glomerulonephritis. Am J Kid Dis 2004; 43: 388-393; Lionaki S, Jennette JC, Falk JR. ANCA and anti-GBM autoantibodies in necrotizing and crescentic glomerulonephritis. Semin Immunopathol 2007; 29: 459-474; Lindi# J et al. Clinical outcome of patients with coexistent antineutrophil cytoplasmic antibodies and antibodies against glomerular basement membrane. Ther Apher Dial 2009; 13:278-281)

2. It is very unusual that no linear IgG deposition in kidney biopsy was found in a patient with positive anti-GBM antibodies in serum. I would like to see a discussion and possible explanation of this unusual finding. May be the reason was not well preserved frozen kidney specimen for immunofluorescence in the first biopsy. Also subepithelial deposits observed by electron microscopy, were not seen by immunofluorescence. In the second biopsy, linear deposition could be absent due to only low value of anti-GBM antibodies in serum or could it be that scanty linear deposition was covered by fine granular IgG deposits?

3. The authors’ assumption in Conclusion: “The presence of anti-hLAMP2 antibodies in this patient’s serum might be in line with the primary event being a SVV associated with MPO-ANCA and anti-hLAMP2 antibodies with secondary development of anti-GBM antibodies.” is not understandable and needs some further explanation.

Minor Essential Revisions

1. Was immunofluorescence done in the lung biopsy? Particularly in absence of
linear deposits in the kidney, IF results in lung should be given if available.
2. I would suggest adding data on antihLAMP2 antibodies in Table 1.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

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

Declaration of competing interests:

I declare that I have no competing interests' below.