Reviewer's report

Title: Case report: Scleroderma with crescentic glomerulonephritis

Version: 4 Date: 25 September 2007

Reviewer: Andrew Short

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: Unexpected or unusual presentations of a disease

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: No

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: No

Comments to authors:

General It is interesting that crescentic nephritis should occur in scleroderma but it has been reported before. Several papers have shown this link to relate to the presence of ANCA antibodies. I feel that you must determine whether ANCA are present in this case. The presence of Anti-nuclear antibodies can be compensated for and in particular an MPO and PR3 assay are needed. Whilst you immunoperoxidase is not consistent with ANCA nephritis, nevertheless I think many readers would be suspicious that there is an ANCA associated nephritis in this case. The co-existence of ANCA related disease with other connective diseases is well reported. If you can clearly confirm that ANCA, MPO and PR3 are all negative then this paper could be published.

Revisions necessary for publication

The authors must establish whether ANCA antibodies (and MPO, PR3) are present or not. Without this the case may not be very different from many others. If present then I would not recommend publication.
What next?: Revise and resubmit

Quality of written English: Needs some language corrections before being published