Reviewer's report

**Title:** Glucocorticoid hypersensitivity as a rare but potentially fatal side effect of pediatric asthma treatment: a case report

**Version:** 4  **Date:** 7 February 2008

**Reviewer:** Lars Lange

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: Presentations, diagnoses and/or management of new and emerging diseases

**Has the case been reported coherently?:** Yes

**Is the case report authentic?:** Yes

**Is this case worth reporting?:** Yes

**Is the case report persuasive?:** Yes

**Does the case report have explanatory value?:** Yes

**Does the case report have diagnostic value?:** Yes

**Will the case report make a difference to clinical practice?:** Yes

**Comments to authors:**

Interesting and important report on a rare allergic reaction to a specific drug showing the diagnostic value of a new diagnostic method for the first time (basophil activation test) and thus helping to understand the pathogenesis of the disease. It is especially of value, that inspite a positive test result in SPT further diagnostic procedures were done.

To increase the possibility for colleagues to learn from that report it would be interesting to have more details about in vivo-testing (preparation and concentration of pricktest-solutions)

Has the patient received any medication for the acute allergic reaction to PSH? It is interesting, that the reaction resolved within 30 min. This was probably no spontaneous resolution?!

As the reaction had a traceable immunologic reaction and consisted of urticaria, nausea and dyspnea it should be termed as "anaphylactic" reaction, not "anaphylactoid" reaction (page 5, line 2). Recent guidelines (ALLergy 2007;62:857-71) have suggested to avoid this term.

**What next?:** Accept after minor revisions
Quality of written English: Acceptable