Reviewer's report

Title: Rapidly progressive dementia and Parkinsonism as a gliomatosis cerebri's initial clinical presentation in a 82 year old patient. A case report

Version: 4 Date: 21 December 2007

Reviewer: Gilles Fenelon

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

Does the case report have explanatory value?: No

Does the case report have diagnostic value?: No

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

Comments to authors:

Interesting case report supporting the use of MRI in patients with parkinsonism and cognitive deficit.

The following points should be addressed:

1. Introduction. ..."a very rare tumor affecting the elderly". Gliomatosis cerebri (GC) does not predominantly affect the elderly.

2. Case report. A more precise description of memory impairment and of parkinsonism (asymmetry ? gait ? speech ? severity of bradykinesia and rigidity ? ...) should be provided

3. In several instances (case report, discussion), "Parkinson disease" is used instead of "parkinsonism"

4. Case report. The authors mention the diagnosis of dementia with lewy bodies. Did the patient report hallucinations ?

5. Case report, MRI. Where lesions enhanced following gadolinium administration ? Fig 1. should include a MR image at the level of lenticular nuclei.
6. Discussion (and introduction). The fact that the diagnosis of GC is probable and not certain (no histological confirmation) should be acknowledged.

7. References. Another case of parkinsonism + cognitive impairment secondary to GC has been published and should be quoted: Slee et al. J Neurol Neurosurg Psychiatry 2006;77:283-4.

Quality of English:
I cannot answer this.

What next?: Revise and resubmit