Reviewer’s report

**Title:** Insulin dependent diabetes mellitus in a patient with Kearns-Sayre Syndrome: a case report

**Version:** 3  **Date:** 7 December 2008

**Reviewer:** Sebastian Beck

Which of the following best describes what type of case report this is?: New associations or variations in disease processes

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: No

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

Is the anonymity of the patient protected?: No

Comments to authors:

**GENERAL:**
(1) This is an interesting case report about a patient, who presents a genetic disorder (KSS) and developed some additional symptoms (that have been seen sporadically in other patients already. The authors underline that awareness for these symptoms is important for everybody who treats patients with KSS.

(2) The introduction and case presentation is clear in general. The pathophysiological thoughts about mitochondrial disease in the discussion would be appropriately placed in the introduction.

(3) Pictures of Brain CT and/or MRI would be nice, such as histological pictures from muscle biopsy.
(4) Figures 1, 2, and 4 do not add much information; Figure 3 is still doubtful in terms of maintaining the confidentiality of the patient. Even with obtained informed consent from the patient’s parents.

CONTENT:
(1) In the discussion the authors mention that they found 8 references for Fanconi syndrome in KSS. As this association is the key message of the article, it would be worth while citing all of these references.
(2) The first paragraph of the conclusion is no conclusion derived from the case presentation or from the discussion.
(3) Figure 4: The patient with KSS seems to be the patient on the right in the picture, not on the left.

FORMAL:
References should be cited in the sentences, not after the sentences, example:
“The possibility of mitochondrial dysfunction needs to be taken into account by every medical subspecialty. [4]”
Should be: “The possibility of mitochondrial dysfunction needs to be taken into account by every medical subspecialty [4].”

Spelling errors should be eliminated (some examples: “rethinopathy”, “establishe”, “sterted”).

REFERENCES:
References have not been prepared carefully according to the instructions for authors; “[CrossRef]”, “[ISI]”, “[Medline]” or “[PubMed - indexed for MEDLINE]” should be taken out.

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

Declaration of competing interests:
I declare that I have no competing interests.