Reviewer's report

Title: Development of recurrent facial palsy during plasmapheresis in Guillain-Barre syndrome: a case report

Version: 1 Date: 16 March 2010

Reviewer: Richard Rison

Which of the following best describes what type of case report this is?: Unreported or unusual side effects or adverse interactions involving medications

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?: 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

Is the anonymity of the patient protected?: Yes

Comments to authors:

I have reviewed the manuscript by Dr's. Stevenson, Wiemer, and Bogorad. The authors present a 35 year old previously healthy patient who contracted acute idiopathic demyelinating polyradiculoneuropathy (GBS) and then developed recurrent facial paresis with plasma exchange (PE). The facial paresis appears to have improved following the cessation of PE and switching to IvIg. They authors propose potential plausible mechanisms of why this happened.

In general this was a well written and interesting paper. I too could find no previous reports of this when I searched the literature. The temporal association of events does suggest a causative effect of the PE on the facial paresis rather than chance alone.
Minor points:
1. Please state the ethnicity of the patient.
2. Please state if the patient received any recent vaccines.
3. p.4 line 8 the sentence "He had positive titers of CMV IgG and IgM and he had a borderline reactive CSF Lyme antibody study though negative serum antibodies suggested a false positive result." Was there a CSF Lyme PCR checked?
4. Were HSV 1&2 and/or EBV CSF PCR’s checked? Were West Nile profiles checked?
5. It would have been interesting to know what the exact plasma volume exchanged was with each session and also the schedule that was originally planned (e.g., 2/0/2/1 or 1/0/1/0, etc.) along with the dose of Ivg used.
6. p.5 second paragraph 1st sentence please be more specific regarding the location of the NCS (nerve conduction studies) that were done (i.e., tibial, peroneal, median, ulnar, etc.). Also please state whether there was any focal conduction blocks and the extent of any abnormal temporal dispersion.
7. Please define the relevant abbreviations before using them (e.g., CSF, HIV, etc.).

Quality of written English: Acceptable

Declaration of competing interests:

I declare that I have no competing interests.