Reviewer’s report

Title: Itraconazole induced Quadriparesis and Oedema

Version: 1 Date: 5 July 2010

Reviewer: Steve Vucic

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?: 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?: No

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

Is the anonymity of the patient protected?: Yes

Comments to authors:

Karadi and colleagues report an unusual case of severe neuropathy developing post itraconazole therapy. Interestingly, the clinical features mimicked GBS, although the clinical progression was longer that that seen in GBS (> 4 weeks) and the patient recovered without any specific immunomodulatory therapy. The case report would be of interest. However, I have a couple of suggestions that would perhaps improve the manuscript.

1. The authors should outline more fully the neurophysiological findings. Perhaps including a table summarizing the neurophysiological findings would be of help.

2. A figure of the nerve and muscle biopsy illustrating axonal loss and absence of demyelination would be of interest.
3. Was testing performed for anti-ganglioside antibodies, in particular anti-GM1 and Campylobacter serology. If so this should be incorporated in the revised manuscript.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

Nil