Reviewer's report

Title: Severe refractory autoimmune hemolytic anemia with both warm and cold autoantibodies: complete response to Rituximab

Version: 2 Date: 20 May 2010

Reviewer: Lisa Willcocks

Which of the following following best describes what type of case report this is?: Other

If other, please specify:

Novel therapy

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?: No

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

Is the anonymity of the patient protected?: Yes

Comments to authors:

This is an interesting case report with novel aspects. It is clearly written and has an informative and relevant discussion of the use of rituximab to treat autoimmune haemolytic anaemia.

I have a few queries:

Top of page 5: Clarification of the timing of plasma exchange in relation to rituximab, as plasma exchange would remove rituximab. How many days of plasma exchange were given? What volumes were used?
Middle of page 5: The nodular sclerosis on renal biopsy is interesting. Was the patient diabetic or obese? Was he HIV positive? Was this an FSGS type pattern? If so, what kind of FSGS? Could the authors include light microscopy of the biopsy? The authors suggest that the nephrosis is secondary to AIHA: it would be interesting if they could speculate a mechanism.

Top of page 6: I'm not sure of the relevance of the use of rituximab to treat membranous nephropathy if there was no evidence of the disease on light microscopy or EM. However, there is a body of evidence regarding the use of rituximab with anti-virals in the treatment of cryoglobinaemia which should be mentioned.

The last sentence should be moderated – a single case is not sufficient to claim that rituximab is an effective treatment for AIHA.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.