Reviewer’s report

Title: EBV Myelitis and Castleman's Disease in a Patient with Acquired Immune Deficiency Syndrome (AIDS): a Case Report

Version: 2 Date: 14 October 2010

Reviewer: Eric Oksenhendler

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?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: No

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?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

The authors report on a case of myelitis occurring in a patient with HIV-MCD. A diagnosis of EBV myelitis is proposed on the basis of a positive EBV detection using PCR in the CSF.

Case presentation

The patient exhibits a fully suppressed HIV replication but still a CD4 cell count below 200. It would be useful to know for how long the VL is under limit detection. Only a few months would raise the possibility of immune restoration symptoms.

The patient presented with constitutional symptoms, anemia and low serum albumin level; however CRP is almost normal which is very unusual. Any
explaination or comment?
Legend of figure 2 suggests that a double staining is presented (HHV8 and lambda). Is it? The infiltration with HHV8 is intense and although the lymph node architecture looks intact, a diagnosis of microlymphoma could probably be proposed. What is the exact conclusion of the pathologist?
The diagnosis of myelitis is confirmed after CSF examination. In a HIV+ patient the detection of EBV in the CSF is strongly associated with primary CNS lymphoma. Was a quantitative evaluation of EBV performed in the CSF (and in the blood)?

Discussion
The major concern is the exclusion of CNS lymphoma. Under such a hypothesis, steroid therapy would have been at least as effective. We don’t have any follow-up data for the patient.

Quality of written English: Acceptable

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