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: 30 November 2010

Reviewer: Corey Casper

Which of the following best describes what type of case report this is?: None

Has the case been reported coherently?: No

Is the case report authentic?: No

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?: No

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 present a case of what they purport to be a case of transverse myelitis associated with Castleman disease in a person with HIV. Several issues are not addressed in this case report, as outlined below.

1) MCD is associated with numerous neurologic sequelae, including polyneuritis. No data are presented to support a diagnosis of transverse myelitis in this case, and the discussion fails to contemplate whether the neurologic findings may simply represent a complication of MCD. Indeed, the brisk neurologic improvement in response to treatment of MCD supports Castleman’s as the etiology of the “myelitis”

2) EBV DNA is frequently detected by PCR from pleocytotic CSF, as EBV infects
monocytic cells. There is no report of EBV copy number; a very high EBV viral load in the CSF may support its role in the pathogenesis of the neurologic disease, but even this would not establish causality.

3) Given #1 and #2, to purport that this is one of the first case reports of EBV transverse myelitis would require much more evidence than is presented.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests