Reviewer’s report

Title: Malignant neuroleptic syndrome following deep brain stimulation surgery: a case report.

Version: 1 Date: 8 November 2010

Reviewer: Jairo Espinoza

Which of the following best describes what type of case report this is?: An unexpected event in the course of observing or treating a patient

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?: Yes

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

Is the anonymity of the patient protected?: Yes

Comments to authors:

- Thanks for this report on an unusual and potentially fatal complication.
- As the authors correctly point out, there is an increasing number of centers performing deep brain stimulation procedures. It hence becomes of utmost importance to develop and socialize institutional protocols to prevent and detect these complications. General and specialized staff should be aware of general measures such as not to use dopamine blocking agents in patients with movement disorders such as Parkinson’s disease. In our group, a patient with Parkinson’s disease developed neuroleptic malignant syndrome, after bilateral subthalamic DBS. The cause, a general practitioner ordered halopidol for agitation.
Quality of written English: Acceptable

Declaration of competing interests:

I have to declare that Medtronic, the manufacturing company for DBS systems, has given me fees and funding to attend meetings. I think that this company will not gain or lose financially from the publication of this paper.