Reviewer’s report

Title: Carotid artery occlusion and corticobasal syndrome: cause or coincidence? A case report

Version: 2 Date: 21 March 2011

Reviewer: Toma Spiriev

Which of the following best describes what type of case report this is?: Unexpected or unusual presentations of a disease

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?: Yes

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

Is the anonymity of the patient protected?: Yes

Comments to authors:

I read with great interest the article "Carotid artery occlusion and corticobasal syndrome: cause or coincidence? A case report". As authors point out, many patients who are diagnosed during their life with corticobasal degeneration using current diagnostic criteria do not have classical corticobasal degeneration pathology. Therefore, more appropriate to use is the term corticobasal syndrome (CBS), as corticobasal degeneration should only be employed after histopathological diagnosis. The authors present a case with clinical features and MRI appearance of CBS, where the cause is pointed to be from a vascular origin (occlusion of the left internal carotid artery).

This article is well-written, but minor revisions should be done before publication.

1) In the paragraph Introduction, line 6, sentence: “Pathologically, CBS can be
caused by classical CDB pathology....” The abbreviation CDB should be changed to CBD
2) Figure 1. The word right should be changed to” left frontoparietal lobe”

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.