Reviewer's report

Title: HELLP Syndrome in Cystic Fibrosis: a case report

Version: 1 Date: 15 November 2011

Reviewer: Johannes Ott

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?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

The authors present the case of a HELLP syndrome in a woman with cystic fibrosis. The case itself is of interest due to the rareness of this combination. English language needs a little improvement. Neonatal outcome data should be provided more in detail, the discussion needs to be revised. I recommend publication after major revisions.

Major comments:

1. By the way, this is not the very first report of HELLP syndrome in a woman with cystic fibrosis. Nevertheless, the coincidence of these two diseases seems very rare. The authors may want to cite the following article: Patel et al. A 22 Year Old Pregnant Cystic Fibrosis Female And HELLP Syndrome. Am. J. Respir. Crit. Care Med..2010; 181: A5898.
2. In the 28th week of gestation, a blood pressure value of 123/90 was found. Was the patient advised to measure her blood pressure at home by herself? Was her urine checked for proteinuria (by a test strip for urinalysis screening)?

3. Please provide the BMI-level for the patient. Had the previous pregnancy been complicated? Why had she delivered at 36 weeks of gestation?

4. The authors should provide more details on neonatal outcome: APGAR score, base access, arterial pH level.

5. Did the patient receive any HELLP-specific treatment after the cesarean section?

6. “In our patient, the major risk factors were CF-related diabetes, and pregnancy with a relatively new partner.” – Why should pregnancy with a new partner be a risk factor for HELLP-syndrome? Accepted risk factors for development of the HELLP-syndrome are: age under 20 or over 35 years; being pregnant for the first time; high blood pressure during pregnancy, preeclampsia, or eclampsia; HELLP syndrome, preeclampsia, or eclampsia during a previous pregnancy (see for example: O’Hara Padden M (1999) HELLP Syndrome: Recognition and Perinatal Management; available at http://www.aafp.org/afp/990901ap/829.html).

7. In the discussion, the authors should focus on the following questions: How can HELLP and cystic fibrosis possibly influence each other? Might HELLP syndrome put the patient at risk for worsening of the lung function? Do the authors feel that patients with mild cystic fibrosis need extra care in the case of pre-eclampsia / HELLP-syndrome?

Minor comments:

1. “Her pre-partum forced expiratory volume in one second (FEV) was 2.62L. (87% predicted)” should be “Her pre-partum forced expiratory volume in one second (FEV) was 2.62L (87% predicted).”

2. “Laboratory investigations revealed;” should be “Laboratory investigations revealed:”

3. Please revise “she was commenced on intravenous aztreonam” to “she was put on intravenous aztreonam”

4. Please rephrase “[…] given two 11.4mg doses of intramuscular betamethasone 12 hours apart to assist with foetal lung maturation”

5. Please rephrase “made an uneventful recovery”

6. “Risk factors for the development of preeclampsia are legion.” – I have to apologize, but I don’t understand this sentence.

7. “and pregnancy with a relatively new partner,” should be “and pregnancy with a relatively new partner.”

8. “under spinal anaesthetic” should be “under spinal anaesthesia”

**Quality of written English:** Needs some language corrections before being published
Declaration of competing interests:

I have no competing interests to declare.