Reviewer’s report

**Title:** Malignant lymphoma with diffuse cardiac involvement detected by multiple imaging examinations: a case report

**Version:** 1  **Date:** 13 January 2012

**Reviewer:** Pedro Lozano

**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?**: Yes

**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 have few question with respect of the echocardiogram portion of their description. It would be very important and neat, if Dr Ishiwata and colleagues can provide data about the LV systolic function; the ideal is the calculation and/or estimation of EF, including fraction of shortening of the LV; even more important than the systolic function, to deepen into the description of diastolic functions of the LV. In this section, the authors would need to provide E/A data of the Mitral inflow, as well of the pulmonary vein flow pattern and E’/A’ of tissue. and E/E’ ratio of the MV annulus. The authors are implying that this is a restrictive cardiomyopathy and being such the diastolic parameters are crucial to support their findings. also for the reader and to clear the doubts if they can included or in this case provide evidence that this is not constrictive pericarditis, which is in the differential diagnosis, and is not clear reported in the pathology.
report or at least not mentioned.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

'I declare that I have no competing interests'