Reviewer’s report

Title: Acute leukemia in pregnancy Refusal of treatment - life threatening decision: a case report

Version: 1 Date: 12 January 2013

Reviewer: Victor Noriega

Which of the following 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?: Yes

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:

It is a very interesting case report, generally well written, that points out the difficult situation of managing a life threatening disease only with support care, due to patient’s decisions. However, before publication some modifications should be done:

1- Classification of the Acute Myeloid Leukemia according to WHO standards must be included, with cytogenetic and molecular characteristics. This would help to understand the association between pregnancy and leukemia relapse, as higher rates of relapse are associated with specific disease characteristics.

2-In paragraph 2 of the discussion, risk of bleeding is "attributed to disseminated intravascular coagulation". Despite it can happen in any acute
myeloid leukemia, this specific issue is highly associated to acute promyelocitic leukemia (M3, t(15;17), PML-RARA), which is not mentioned in the text, but yes in the bibliography. Low platelet level (<20,000 /ml) is associated with increased risk of spontaneous bleeding.

3- White cell counts at relapse time were 45 x10^9/L, with 50% blasts (3rd parragraph of the case report). I would appreciate any comment about blood counts evolution from week 23 to week 35, and any other complication. Leukemic patients are in higher risk of infection. Did the patient receive any prophylaxis???

4- Coagulation results should be reported according to international standards (6th parragraph of case report) using Protrombine time or INR and Activated partial thromboplastin time.


Quality of written English: Acceptable

Declaration of competing interests:

I declare that I have no competing interests