Reviewer’s report

Title: De novo monoclonal immunoglobulin deposition disease in a kidney transplant recipient

Version: 1 Date: 7 December 2013

Reviewer: Paul Cockwell

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?: No

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?: No

Will the case report make a difference to clinical practice?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

This is an interesting case – however it needs to be far more accurately reported to be suitable for publication.

1. Why is this a diagnosis of myeloma?? Clonal light chain production can be associated with clonal proliferation of any cell of B-cell lineage. Precision in the haematological diagnosis is required. What does the marrow show on biopsy (are you confusing myelogram and bone marrow biopsy? they are completely different tests). Please identify the % of clonal plasma cells in the bone marrow aspirate or biopsy. If there was a plasma cell infiltrate then there should have been further studies to demonstrate that this was clonal. Please report the marrow clonal studies.

2. In February 2007 did the patient have tests for an immunoglobulin light chain
clone – either by serum or urine tests. A normal serum protein electrophoresis does not exclude a monoclonal gammopathy. The sensitivity of the test is for 0.5 g of a heavy chain (intact Ig) M protein. You have not excluded recurrent disease in this patient – this needs to be made clear in the case report.

3. Serum protein electrophoresis does not measure light chain levels in the serum. What test did you use to quantify light chain levels?? Presumably the patient has stored serum from the time of transplantation. You should carry out serum light chain levels on any serum previously available for this patient. Accuracy in reporting and utilising all relevant tests is a requirement for publication.

4. You must report electron microscopy on the kidney biopsy. For monoclonal gammopathy of renal significance this is required for diagnostic accuracy.

5. The light chain immunofluorescence needs to be shown against controls.

Quality of written English: Needs some language corrections before being published

Declaration of competing interests:

I declare that I have no competing interests