Reviewer’s report

Title: Fainting Fanconi syndrome clarified by proxy. A case report.

Version: 0 Date: 05 May 2017

Reviewer: Martin Windpessl

Reviewer’s report:

This is an interesting and well-written case report about a familial form of renal Fanconi syndrome (RFS) due to a mutation in HNF4A, more widely known as the cause of MODY 1. Perhaps the most interesting aspect of this paper is the fact that despite extensive evaluation (involving 3 kidney biopsies), the mother’s exact diagnosis remained elusive until modern sequencing technologies using a panel allowed a diagnosis in her son within months postpartum. Therefore, this report is also of interest for non-pediatric nephrologists.

I have only some minor comments:

The abstract does not specify what the underlying disorder (i.e. the HNF4A mutation) ultimately was. This should be added.

As not all readers will be acquainted with the particularities of the proximal tubule, a few explanatory sentences about RFS would be worthwhile, including a remark regarding the heterogeneity of this syndrome (hereditary vs. acquired…).

Suggest stating the obvious (i.e. autosomal-dominant inheritance) once in the conclusion.

Lastly, "HNF4A" should be explained and added to the list of abbreviations.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

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