Reviewer’s report

Title: Leptospirosis Presenting As Haemolytic Uraemic Syndrome

Version: 0 Date: 09 May 2017

Reviewer: Manfred Wallner

Reviewer’s report:

Interesting case report worth publishing, but it requires a thorough revision, especially of the Discussion section

p 2

line 6: leptospirosis-associated

line 15: haemolytic uraemic syndrome

line 16: Surprisingly, the stool culture...

line 17: one of the differential diagnoses

line 25: as current evidence suggests

line 29: haemolytic uraemic syndrome

p3

line 7: However, in 2014, ..

line 18: ...multi-organ failure

line 19: mild influenza-like illness

line 23: multi-organ failure with mortality greater than 50%.

line 27: As the paper by Hanvanich et al. is mentionned for the first time in this report, it should be annotated.

line 32: „over the weekend" should be omitted

line 34: ... a weeklong history of fever,

line 41: He admitted to caring for his mother's pet, a cat, in the past 2 weeks.
His temperature was 38.4°C;

blood pressure (BP) 121/57 mm Hg;

haemoglobin level of 9.4 g/dl (I suppose...)

urea...was raised at 23.7 mmol/L (I suppose...) with a creatinine level of 534 µmol/L (I suppose...). His potassium was 4.1 mmol/L (I suppose...) with a...

bicarbonate level of 18 mmol/L (again I suppose...)

Author: what is your unit of bilirubin? Author: what is your unit of alkaline phosphatase?

author: what is your unit of ALT?

normal value for INR is 0.8-1.1, so it is minimally raised. Normal value for prothrombin time is 11-13.5 seconds, so it is not raised

author: what is your unit for creatine (not: creatinine) kinase?

author: how do you explain the elevated level of haptoglobin in the light of overt hemolysis?

author: what is your unit of fibrinogen? Auto-immune or autoimmune I suppose

...anti-double-stranded DNA antibodies

...were negative

author: what do you mean by „fragments with schistocytes”? There are only schistocytes, also called fragmentocytes

...Shigatoxin-producing E. coli-induced ...

instead of „Tazosin" use generic name

hospital-acquired

...38°C..

BP dropped to 60/40 mm Hg

...ongoing...
line 29: author: what do you mean by „ionotropic support“? I think you meant „inotropic support“.

line 38/39: author: do you mean „IgM antibodies at a titre of 1:2560“? Please talk to your microbiologist for correct interpretation of the results

line 45/46: please check for better wording

p 5

line 1: His creatinine ...was 82 µmol/l (I suppose)

line 2: ...bilirubin 264 µmol/L. Author: how do you explain the persisting high level of bilirubin?

line 6: do you mean renal involvement in leptospirosis? The most common cause of death worldwide is not renal involvement.

line 10: author: what do you mean by „kidney tissues and tubule“?

line 18: check your wording

line 34: author: what do you mean by „platelet aggression“? Should it read „platelet aggregation“?

line 39: „&“ should probably read „or“?

line 41: author: what do you mean by „it“ is found...

line 43: ...that stimulate...

p 6

line 2: this is a false interpretation of the cited paper: in 7% of the patients in the TTP/HUS registry, the presenting clinical features were subsequently attributed to a systemic infection.

line 6: Leptospira bataviae

line 8: The gold standard for diagnosis is a MAT...

line 16: post-exposure

line 17: ...when large quantities of endotoxins are released...

line 19: ...with the death of these bacteria occurs faster...

line 20: patient's
line 21: „with Tazosin" may be omitted

line 22: again: inotropic support, not ionotropic

line 24: instead of „urgency” I would suggest „a clear indication”

line 26: ...emerging evidence for PEX as a therapeutic measure in...

line 43: Prompt recognition ....is mandatory for reducing the risk of mortality.

p8/9

The table of references needs a thorough revision, as there are a lot of typos and missing data, e.g.

line 10: 2001

line 17: Leptospiral nephropathy. Sem Nephrol

line 20: Terrell DR, Vesely SK


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If not, please specify what is required in your comments to the authors.

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