Reviewer's report

Title: PR3 vasculitis presenting with symptomatic splenic and renal infarction: a case report and literature review

Version: 0 Date: 04 Jan 2019

Reviewer: Marco Allinovi

Reviewer's report:

Renal infarction is a rare condition resulting from an acute disruption of renal blood flow.

It is defined by radiologic findings (CT angiography or magnetic resonance angiography) that included single or multiple wedge-shaped parenchymal perfusion defects in the kidney.

Among the many possible causes, we can count cardiogenic, hypercoagulable and idiopathic factors, but also ab-extrinsic compression (renal artery injury, neoplasia), thrombosis, emboli, sickle cell anemia, medium- and large-vessel vasculitis and arteritis.

Despite aggressive treatment, renal infarction can lead to acute kidney injury, new-onset chronic kidney disease, and rarely also end-stage renal disease and death.

Authors described the first reported case of symptomatic bilateral renal cortical infarction in association with partial splenic infarction. They also claim that renal and splenic infarction are underestimated among patients with ANCA-associated vasculitis.

Authors should also exclude cocaine exposure, and sickle cell anemia.

I would like to congratulate with the authors for this excellent submission and for their ability to summarize the case.

I found the case very interesting and thoroughly enjoyed reading the manuscript.

The writing is clear and easily understandable.

I have no criticism on manuscript structure or content.
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- Is the exact sample size (n) reported for each experimental group/condition (as a number, not a range)?

- Are the description of any error bars and probability values appropriate?

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