Reviewer’s report

**Title:** Dasatinib-induced nephrotic syndrome in a patient with chronic myelogenous leukemia: a case report

**Version:** 0  **Date:** 16 Oct 2018

**Reviewer:** Maike Büttner-Herold

**Reviewer's report:**

The authors describe an interesting case of a 40 year old patient developing nephrotic syndrome in the course of dasatinib therapy. Proteinuria greatly improved after switching therapy to another TKI and the authors argue that the renal side effects might be a consequence of VEGF inhibition. Additionally, fibrillary glomerular deposits were observed, which were interpreted as coincidental fibrillary glomerulonephritis. As the spectrum of TKI increases steadily it is very important to discover and understand the side effects induced by such drugs.

With regard to the coincidental fibrillary GN diagnosed by the authors, it would be very important to know whether Kongo-red staining was performed and negative to exclude amyloidosis. Moreover, it is not typical to find negative results of immunofluorescence, especially with regard to IgG and C3c, in fibrillary GN. It therefore would be helpful to stain the present case with an antibody specific for DNAJB9, which has been suggested as a specific marker of fibrillary GN (Nasr et al, Kidney Int rep. 2017 Aug 8; 3(1):56-64) to prove fibrillary GN.

As the authors suggest that renal side effects induced by dasatinib might be a consequence of VEGF-inhibition, it would also be very interesting for us to know whether characteristic morphologic changes described by our group in the context of aVEGF-therapies were also detected in the present case (Pfister et al., Histopathology. 2018 Jul 17. Doi:10.1111/his.13716).

It should also be explained more clearly why the authors believe that fibrillary GN is coincidental and not associated with the therapy. So far it is very difficult to follow the reasons for this assumption.

Page 4, line 17: do the authors really mean "myoblastic"?
Page 6, line 7: does "hepatitis" refer to viral hepatitis?

Page 6: As at a later time point it is stated that "hematuria almost disappeared" it would be helpful to include findings of urinalysis here.

Page 7, line 11: why was it "possible nephrotic syndrome" and not nephrotic syndrome in the reported patients?

Page 8, lines 15-17: can this sentence please be clarified.

Page 9, line 6: maybe "document" should be replaced by "reports" and "dasanitib" is misspelled and should be "dasatinib".

Page 15, line 6: in figure D also subepithelial fibrillary deposits are depicted.

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

No

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.

No

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:

Needs some language corrections before being published

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