Reviewer's report

Title: An unusual cause of delayed hematoma after carotid endarterectomy: A case report

Version: 0 Date: 01 Apr 2019

Reviewer: Gianfranco Varetto

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While falling within the scope of the journal, we think that the current draft of the manuscript presents several elements needing a major revision before considering publication.

Namely, we found that the manuscript is missing critical elements that would allow a better definition and presentation of the clinical case and present some assertions in the discussion that could need further clarification. We also recommend a better revision of the language before submitting and checking if more recent references are available.

Detailed examples of what we found to be worthy of revision are explained below.

Page 4 Lines 14-18: The presentation affirms that infarctions are present in both cerebrums and there is sign of an old infarction in the occipital lobe, but it only describes an asymptomatic carotid stenosis the right ICA. We reckon that adding an overview of both carotids and vertebrobasilar circulation, if available, is advisable.

Page 4 Lines 28-30: Examining the medical history of the patient, we find that he already has a diagnosis of prostatic hyperplasia. If available, data related to this diagnosis could allow a comparison between them and what you found while treating the patient.

Page 4 line 53: It is here reported that the patient had tracheal deviation. Compare with page 7, line 34, which describes the trachea as central. This passage needs revision.

Page 5 line 1: We can read that the symptoms worsened over one hour and a half and he lost consciousness in three minutes. Does this imply that he, in that time, progressively lost consciousness or that he stayed unconscious for three minutes? We think that a better clarification of the timeline and some information on how it has been assessed can improve the description.

Page 5 line 6: Platelets are initially described as normal, and then we can see that they drop to low values. This implies that a second blood test was performed. Clarification on this passage and on its results is needed. Secondly, no data are available regarding the preoperative situation of the coagulation. We think that a comparison, in order to define if the patient didn't have elements that could have suggested a non-overt DIC even before the intervention, could be useful. Lastly, mentioning if other causes of bleeding were ruled out could improve the diagnostical description (e.g. the combination of non overt DIC and heparin induced thrombocytopenia, if heparin was administered)
Page 5 lines 27-31: "blood was observed…bleeding cannot cease". We observe a tense shift, from simple past simple to simple present in the same sentence. Please check for this kind of issues in the manuscript.

Page 6 lines 26-43: A bone scan was performed and it showed diffused metastasis in thoracic bones. Are there any other preoperative imaging study that can improve the definition of the case and support the metastasis finding?

Page 8 lines 6-54: Case reports shows that hyperfibrinolitic DIC is a rare complication associated with metastatic prostate cancer, as found in the patient described. In this section, you recommend the execution of PSA and ultrasound in patients presenting with prostatic symptoms, adding that early stage cancer detection is difficult. We think that a better clarification is needed on which stage of the disease should be investigated, considering that the proposed diagnostic means are currently discussed for leading to an overdiagnosis of early stage prostate cancer, which seems not to be related to the development of DIC. Therefore, we think that a more comprehensive indication, supported by literature, of who, and by what means, should be subjected to preoperative tests and what stages of the disease could be responsible of the symptoms described in your patient could greatly improve the conclusions.

Figure 2: The PET image shows normal captation in only one of the kidney and elevated creatinine has been reported in the article as a cause for hematoma formation. Reporting a brief explanation of this finding in the medical history of the patient is advisable.

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.

Yes

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
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Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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