Reviewer’s report

Title: An unusual case of acute lupus haemophagocytic syndrome: a test of diagnostic criteria

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Reviewer: Sae Ochi

Reviewer's report:

The authors present a rare case in which haemophagocytic syndrome proceeded the onset of SLE. The case itself is interesting enough, but still it may need some revision.

1. As the patient showed negative ANA and ds-DNA antibody at the first admission, it is possible that infectious disease induced the onset of SLE. There might be several cases or reviews that describe infection-induced autoimmune diseases, and it is recommended that the authors mention the possibility of infection-induced SLE, then discuss this point with referring previous articles.

2. Also, there still exists a possibility that the symptoms at the second admission is lupus-like syndrome associated with other diseases.
   i. Usually, SLE patient with organ involvement show at least low grade fever. How was the body temperature of this patient?
   ii. What was the dose of prednisolone before the second admission?
   iii. Did the authors tested HIV again? HIV antibodies sometimes become positive after several months.
   iv. The authors show ANA was ‘>1/80’, but x80 of ANA is not 'strongly positive'. What exactly was the titre of ANA? Also, it is recommended to show the pattern of ANA.
   v. ds-DNA is usually shown by IU/ml. How did the authors measure the ds-DNA, and what was the normal limit of this measurement?

3. In the last paragraph of case presentation, the authors said the patient remained asymptomatic, but did not show how long. Please add the period of her remission.

Minor points

1. It seems better to delete '0' in each numbers shown in the article- for example, 03 days → 3 days, 06 months → 6 months- because there is no reason to add 0 in this part.
2. There is also a possibility that she had asymptomatic SLE before her first admission. How was the result of urine test at her first admission?

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An article whose findings are important to those with closely related research interests

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Not suitable for publication unless extensively edited

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