Reviewer's report

Title: Deep cerebral venous thrombosis mimicking influenza-associated acute necrotizing encephalopathy: a case report

Version: 3 Date: 10 Aug 2017

Reviewer: F Schuchardt

Reviewer's report:

1. Do you believe the case report is authentic?
   Yes

2. Do you have any ethical concerns? Please consider if local Institutional Review Board approval or ethical approval was obtained (if appropriate) and if the patient (or their parent or guardian in the case of children under 18) gave written, informed consent to publish this case and any accompanying images. A statement to this effect should appear in the manuscript.
   Comments: No

3. Does the Introduction explain the relevance of the case to the medical literature?
   Yes

4. Does the article report the following information? Where information is missing, please specify.
   a. The relevant patient information, including:
      - De-identified demographic information (age, gender, ethnicity)
      - Main symptoms of the patient
      - Medical, family and psychosocial history
      - Relevant past interventions and their outcomes
b. The relevant physical examination findings

c. Important dates and times in this case (if appropriate, organized as a timeline via a figure or table); if specific dates could lead to patient identification, consider including time relevant to initial presentation, i.e. initial presentation at T = 0, follow up at T = 1 month.

d. Diagnostic assessments, including:
   - Diagnostic methods
   - Challenges (e.g., financial, language/cultural)
   - Reasoning and prognostic characteristics (e.g., staging), where applicable

e. Types and mechanism of intervention

f. A summary of the clinical course of all follow-up visits

Comments: all relevant information is included

5. Is the interpretation (discussion and conclusion) well balanced and supported by the case presented?

Comments: yes

6. Is the anonymity of the patient protected?

Yes

7. Is the Abstract representative of the case presented?

Comments: yes

8. Does the case represent a useful contribution to the medical literature?

Comments: yes
9. Additional comments for the author(s)?

The case and its major points are well presented. Both disease entities are well compared and contrasted and the take home message clearly carved out.

The article is ready for publication AFTER ADAPTING the following two minor aspects:

1. Line 190-192: "In our patient, observation of diminished SIGNALS and enlargement of deep cerebral veins on T2*-weighted MRI led us to reconsider the diagnosis of ANE."

   - As in the previous review#3 'SIGNAL' should be used in singular. (Previous comment #8, refering to Fig. 1, line 12).

2. Line 201-203: "In addition, if intracranial pressure is severely raised, AS IN OUR PATIENT, treatment with osmotic agents is recommended [10]."

   - The reasoning "severely raised intracranial pressure - as in our patient -" needs a minor modification, as formal invasive intracranial pressure measurement was not performed. The diagnosis of elevated intracranial pressure based on the perfectly plausible clinical decision making (decreased level of consciousness and GCS) which should be referred to e.g.by adding a comment on the CLINICAL SIGNS leading to the interpretation of elevated intracranial pressure. Alternatively, the reference to 'as in our patient' could be left.

Thanks to the authors for their effort of drafting this report.

Level of interest
Please indicate how interesting you found the manuscript:

An article of importance in its field

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable
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