Reviewer’s report

Title: Bilateral Spontaneous Lateral Intrasphenoidal and Tranethmoidal Meningoceles: A rare presentation of Idiopathic Intracranial Hypertension

Version: 0 Date: 09 Sep 2018

Reviewer: Carlos Eduardo Ontiveros

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:

Patient consent is not mentioned in text. According to the editorial policy of this journal, consent is required.

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

No.

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:

There is a lack of ethnicity. Although the relevance for this case is not so clear in the literature since it is rare, I understand that in any clinical case publication it is necessary to mention ethnicity to support future studies.

About the clinical history, the author summarizes a lot and does not give details of the evolution of the symptoms. He also mentions meningitis but leaves doubt if the diagnosis was correct. Does not mention classic symptoms of intracranial hypertension, before and after the rhinorrhea, that are relevant in this case.

MRI images for diagnosis are clear but there is a lack of CT images showing bony defects in the left lateral sphenoid sinus and right anterior cribriform plate.

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

Comments:

Once he mentioned that meningoceles are rare presentation of Idiopathic Intracranial Hypertension, there is doubt if the etiology of the condition has been properly investigated.
The author performed a lumbar puncture but did not mentioned the elevated lumbar puncture pressure, the main criterion. He preferred to have support of radiological criteria that are less sensitive and less specific.

6. Is the anonymity of the patient protected? Please consider any identifying information in images such as facial features or nametags, whether the patient is named etc. If not, please detail below.

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:

The literature provides support for the formation of meningoceles in patients with defects in the floor of the skull base, however, the finding of more than one constitute original medical condition which is aligned with the purpose of this publication

9. Additional comments for the author(s)?

I believe that the suggestions for changes have already been mentioned. I highly recommend giving more importance to the medical history and diagnosis.

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

An article of limited interest

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

Needs some language corrections before being published
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No