Reviewer’s report

Title: Isolated adrenocorticotropic hormone deficiency and thyroiditis associated with nivolumab therapy in a patient with advanced lung adenocarcinoma: A case report and literature review

Version: 0 Date: 02 Jul 2018

Reviewer: Elvio Bueno

Reviewer’s report:

1. Do you believe the case report is authentic?

Yes/No

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/No

Yes

All speech and literature review of the introduction are relevant. At the end of the literature review and before the presentation of the case, perhaps it would important to point out that the cases of late-onset of isolated ACTH deficiency are little-described events of the cancer immunotherapy, considering that the last part of the text of any introduction must justify the value of the publication of the case

4. Does the article report the following information? Where information is missing, please specify.

a. The relevant patient information, includin
De-identified demographic information (age, gender, ethnic) demographic data is complete except for the occupation , which could be relevant in case the author considers it

- Main symptoms of the patient
- Medical, family and psychosocial history
- Relevant past interventions and their outcomes

Physical examination findings: It provide the relevant data for diagnostic purposes

Assessment diagnostic, therapeutic interventions, monitoring and reporting of the outcome: they are adjusted and require no modifications.

TimeLine: It is strongly suggested by the complexity of the changes in antineoplastic therapy and for better reader's understanding of chronologic order of the events to make a table in chronological order or flowchart of time from the time of diagnosis of the Lung cancer until the last hospital admission.

b. The relevant physical examination findings

yes

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:

Assessment diagnostic, therapeutic interventions, monitoring and reporting of the outcome: they are adjusted and require no modifications.
5. Is the interpretation (discussion and conclusion) well balanced and supported by the case presented?

Comments:

The literature review of similar to the current report described similar cases and those related to the evolution and therapy of immunological antineoplastic therapy is appropriate. It is interesting that not all cases have positivity of anti-thyroid antibodies or against the pituitary gland, as well as the present case, where there is no laboratory evidence of autoimmunity, despite a predisposition to pathology immune-compatible HLA. It would be interesting to discuss if the lesion of thyroid tissue and pituitary wouldn't be by direct toxicity of the product and not by the generation of new antibodies. It would be interesting to issue some opinion on this point and perhaps make some reference to strengths and weaknesses of the case presentation.

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/No

YES

7. Is the Abstract representative of the case presented?

Comments:

* Introduction: In this report while stressing that there is previous experience of the inhibitor of immune control and its association with autoimmune endocrinological pathology and especially with thyroiditis and to a lesser extent with deficiency of pituitary function complete or partial (with deficit of isolated ACTH production) (Panhypopituitarism), the distinctive character of this case is the time of the occurrence and the fact related to an autoimmune polyglandular disease-associated HLA. This issue should be more clearly expressed in the speech of the Abstract.

* The key elements of the story clinic, physical examination, and treatment was clearly exposed

* The main message of the report is clearly explained.

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

Comments:
Absolutely yes

9. Additional comments for the author(s)?

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

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

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

Acceptable

Declaration of competing interests
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

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which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

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Were you mentored through this peer review?

No