

Review Form 1.6

Journal Name:	Asian Journal of Case Reports in Medicine and Health
Manuscript Number:	Ms_AJCRMH_78529
Title of the Manuscript:	Acute Fatty Liver of Pregnancy: Case report
Type of the Article	Case study

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<https://www.journalajcrmh.com/index.php/AJCRMH/editorial-policy>)

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<ul style="list-style-type: none">- Abstract: "The diagnosis of AFLP is based on exclusion" – While it can be a diagnosis of exclusion, there are subjective and objective diagnostic criteria, which are outlined by the Swansea Criteria, which the author outlines later in the manuscript.- Introduction: Recommend including some of the known risk factors of AFLP (prior AFLP – although the exact recurrence risk is not known, multiples, male fetus, preeclampsia, obesity); May want to point out that the G1528C mutation is more commonly known as the LCHAD mutation, which may be beneficial to readers; The patient should be listed as a G2P1001 at 38 weeks, she cannot be listed as a G2P2002 when she was not yet delivered at time of presentation; She has very pronounced leucocytosis at 34,560 – may want to address or comment; "Ruled out HELLP syndrome" – may want to consider saying was considered lower on your differential diagnosis – was partial HELLP syndrome totally excluded/considered – maybe stress that one of the key components to the diagnosis of AFLP is often profound hypoglycaemia, which is not seen in preeclampsia/HELLP syndrome- Discussion: "maternal stabilization" – How? – generally, ICU status with 10% dextrose to maintain glucose >65 mg/dL is recommended – recommend discussing this and citing a reference; The last line of "therefore, close fetal surveillance and neonatal care are essential" – somewhat confusing/conflicts that is later said in conclusion – the treatment of AFLP is prompt delivery, regardless of gestational age – also would comment on the recommendation of screening the neonate for the LCHAD deficiency with molecular testing and that the neonate often requires close observation for hypoglycaemia.- Conclusion: "Although it is not clear how pathogenesis is diagnosed and diagnosed early, HELLP syndrome and preeclampsia are clinically course of AFLP" – sentence is confusing – I assume the author is suggesting the clinical courses of AFLP, HELLP syndrome, and preeclampsia can present similarly.	
Minor REVISION comments	<ul style="list-style-type: none">- Consider addressing how you would clinically differentiate AFLP, HELLP (even partial), and preeclampsia from one another – for example, hypertension is required for the diagnosis of preeclampsia but not always seen in AFLP, proteinuria is not always present in HELLP syndrome, etc etc.- In the introduction discuss that that LCHAD mutation is the most common mutation leading to AFLP, which is true, but may want to cite that the mutation is only seen in ~20% of cases of AFLP. <p>Not that I can identify – would ensure that there is not a copyright issue with utilizing a table pulled from another publication – Reference #7.</p>	
Optional/General comments	<ul style="list-style-type: none">- There are punctuation and grammatical errors that need to be corrected.- Ensure statements are consistent throughout the entire document – example – try to avoid conflicting/confusing statements in discussion and conclusion.	

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PART 2:

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i> It appears no, they cite that “the patient's consent and the institutional ethic board's permission were taken for the publication of this case report”	

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