



**SDI Review Form 1.6**

Journal Name:	<a href="#">Asian Journal of Research in Dermatological Science</a>
Manuscript Number:	<b>Ms_AJRDES_41268</b>
Title of the Manuscript:	<b>Lymphocytic vasculitis on top of Stevens-Johnson syndrome (SJS): Case Report</b>
Type of the Article	

**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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

**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)
<b>Compulsory</b> REVISION comments	<p><b>The main symptom and main sign should not be omitted.</b></p> <p><b>Had this patient suffer vital myocarditis?</b></p> <p><b>The case history is too simple.</b> <b>The lesions on lips should be presented.</b></p> <p><b>How did her lip lesions and pericardial effusion develop? and their relationships chronically?</b></p>	<p><b>OK</b></p> <p>There was no myocarditis, only epicardial effusion with high LDH which was of 288 µ/L (n 135-214 µ/L).</p> <p>The lesions on lips was Herpes Simplex1 which was the cause of Stevens-Johnson syndrome.</p> <p>The pericardial effusion was developed due to a reaction to lymphocytic vasculitis. Pericardial effusion has no relation to herpes simplex1 lesions in the lips.</p> <p>There was no history of cardiac disease.</p>
<b>Minor</b> REVISION comments	The lesions on her arms and legs are not specific.	These lesion are dried bullous lesions of Stevens-Johnson syndrome, some of them showed iris lesions.
<b>Optional/General</b> comments		