

Dear

Editor,

June-24, 2024

Thank you very much for sending us the decision letter of 24-June-2024 for our manuscript number 922220, entitled "*HDR syndrome presented with nephrotic syndrome in a Chinese boy: a case report and literature review*" by Li-Juan Ma, Wu Yang and Hong-Wen Zhang.

We appreciate very much for the decision and comments. We have done our best to modify the manuscript according to the reviewer's recommendations. We now resubmit our revised manuscript to your journal "World Journal of Clinical Cases" after we made a great effort to revise the manuscript. Thank you again.

In the revised manuscript all additions were marked in **highlight**. The point-by-point response to the referees is listed on pages 2.

Note: the page number may be mismatched because of differences in stationary page size (e.g. European A4 versus American "letter" size papers) and file transformation (e.g. Microsoft Word file is transformed into PDF file).

We would be grateful to your assistance with the English grammar if possible, though we have done our best to correct our typographical and grammatical mistakes.

We appreciate again for your response and effort, and look forward to hearing from you soon.

With the best wishes,

Sincerely Yours,

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**Reply to reviewer's Comments:**

SPECIFIC COMMENTS TO AUTHORS

The manuscript is a case report presenting an infant with HDR syndrome. The child had nephrotic range proteinuria which is an uncommon presentation of the syndrome. Following genetic analysis the authors concluded that the hemizygous variant in exon 3 c.704C>T (p.Pro235Leu) of the GATA3 gene might be responsible for proteinuria. The manuscript adequately describes the background, present status and added value of the described case. To conclude the presented case report is interesting and has clinical relevance, however, English editing is highly recommended. Following is the review of the manuscript sections.

The title reflects the main subject of the manuscript and is adequate in its present form. The abstract mostly summarizes the work described. The sentence "We suggested that GATA3 might also be a cause for infant onset nephrotic syndrome." Should be modified...perhaps mutations, variants in GATA3 might be associated with nephrotic syndrome...

**Answer:** Thank you very much. We agree on your advices. We have changed it to "we suggested that variants in GATA3 might be associated with nephrotic syndrome". See lines 1-2, page 3; lines 24-25, page 3; and lines 1-2, page 10.

In the section CASE SUMMARY the sentences " A 9-month old boy was hospitalized with a complaint of proteinuria for 3 days. The boy was found proteinuria 3 days when he went to hospital because of diarrhea. There were no edema, oliguria, fever and abnormal urine color." should be modified. Proteinuria is not a complaint; it is a laboratory finding. Moreover, the patient did not have edema nor oliguria which might encourage physicians to determine renal function including proteinuria.

Answer: Thank you very much. We agree on your advices. It is true that proteinuria is not a complain but a laboratory finding. We have changed it to “A 9-month old boy was hospitalized with a complaint of detected proteinuria for 3 days”. See lines 5-6, page 3; lines 23-25, page 4.

Keywords reflect the focus of the manuscript. The title of Table 1 should be modified...for example Laboratory findings of the patient at admission. I only presume it is at admission because it is not clearly stated. Moreover, in Table 1 urinary microalbumin and urine protein / creatinine are presented with range...The authors should clearly state when each measurement was performed.

Answer: Thank you very much. We agree on your advices. The laboratory tests were done during hospitalization. Some important tests such as urinary microalbumin and urine protein / creatinine, et al. were done several times and were presented with range. We have changed the title of Table 1 to “Laboratory findings of the patient during hospitalization”. See line 8, page 6.

The authors describe HDR syndrome both in the introduction and discussion section which may be considered redundant.

Answer: Thank you very much. We agree on your advices. We have delate the describe of HDR syndrome in the discussion section. See lines 12-19, page 4; line 18, page 7; lines 1-2, page 8.