Reviewer's report

Title: Parkinson's disease and zoocentric Capgras syndrome: a case report

Version: 2
Date: 14 December 2014
Reviewer: Dejan Georgiev

Reviewer's report:

This is an interesting report on a delusional disorder in PD patients.

Here are my comments:

1. line 78 - which pramipexole - extended release or the three times a day one. Given the dose, I suppose it is the extended release one. Please specify! Also, when the generics are given only, we do not use capital letters - so decapitalize Pramipexole to pramipexole.

2. line 79 - the same goes for Levodopa. Decapitalize. Then again, specify for which levodopa preparation it goes (100/25? 100 mg of levodopa + 25 mg of what?)

3. line 82 - the husband could not possibly notice the ICD, unless being trained neurologist or psychiatrist. He could notice the symptoms of ICD. Please paraphrase.

4. line 91 - so it is not only zoocentric Capgrass - the patine thought that the trees are also replaced. Think about changes the title encompassing the wider nature of the

5. line 97 - do not use abbreviated grammatical forms, even though being correct, in an official script (e.g. her couldn't -> could not; notice these differences she said she wasn't -> was not sure).

6. line 108 - the delusions has not completely despaired - it is plural, she had more than one delusions

7. You say that the brain MRI was normal in 2013, she than developed the symptoms in 2014. Was the brain imaging repeated. I mention this because Capgrass syndrome is an organic delusional disorder and can be sometimes caused by lesions (e.g. tumors) in the that connectin zone between the limbic system and the lingual gyrus (ventral temporal lobe). I do believe that in your case the delusion was related to the dopaminergic drugs, but it would be fair to mention that the MRI was not repeated in 2014. The other reason is, that cognitive deterioration in some PD patients or other parkinsonisms can be quite fast progressive, so doing another MRI in the presence of new symptoms makes sense, especially considering the fact that she was clearly cognitively affected (MoCA score of 21 and later 17.6).
8. In table, please close a legend (e.g. hat is P.G.? P.C.? etc...) 

9. In the discussion section, there is no mention the fact that all psychiatric implications in PD are very often related to cognitive decline or even overt dementia!

Level of interest: An article of outstanding merit and interest in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests