

## Format for ANSWERING REVIEWERS



September 7, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 20259-Review.doc).

**Title:** Recruitment maneuvers in acute respiratory distress syndrome: The safe way is the best way

**Author:** Raquel S Santos, Pedro L Silva, Paolo Pelosi, Patricia RM Rocco

**Name of Journal:** *World Journal of Critical Care Medicine*

**ESPS Manuscript NO:** 20259

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

Re: 20259 R1. "Recruitment maneuvers in acute respiratory distress syndrome: The safe way is the best way"

*Reviewer: As it is shown in this study, acute respiratory failure results from both medical and surgical emergencies at the ICU. According to the cited literature, its frequency varies between 30 to 50%, and indeed, it should be treated with invasive mechanical ventilation to improve lung aeration and ventilation. I agree with the authors that undoubtedly this stepwise recruitment maneuvers can improve hemodynamic instability and inflammatory impact on lungs. However, as it is discussed in this paper, the mismatch of mechanical ventilation can seriously increase the pulmonary mechanical damage (barotrauma pneumothorax) and also it can activate mediators of the inflammatory response with local consequences (pneumonia - atelectasis); regional (cardiac arrhythmias) or systemic (a frequent cause of multi-organ failure in UCI). It would be interesting if the authors could include - in addition to the didactic and explanatory diagrams that are already included in this research - tables, graphs or summary tables to clarify and facilitate the visual integration of the randomized clinical data, the diversal safety types of recruitment maneuvers and the valuable information quoted in this work for better medical and infirmary understanding .*

*Despite the commendable scientific contribution on the subject matter, I'm afraid this paper has not been properly organized under any editorial scheme; I would suggest that it might be restructured using World Journal of Critical Medicine editing rules.*

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Critical Care Medicine*

Sincerely yours,

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