



Dear Editor,

We sincerely thank the editorial board and all reviewers for their valuable feedback that we have used to improve the quality of our manuscript. The comments of one reviewer and one science editor are addressed below with our point-by-point responses. All comments are laid out in normal font, and our responses are given in italicized and bold font.

Reviewer #1:

The authors describe a patient with multiple vascular injuries due to migration of a swallowed fishbone. This is a well-written manuscript which delivers a clear message. The authors claim that multiple fishbone-related vascular injuries have not been reported. A thorough literature search confirms this statement. The manuscript emphasizes the necessity to find and remove the fishbone as soon as possible, which is of great clinical significance. I congratulate the authors on their efforts, especially for honestly reporting the sad outcome. In the reader's opinion, though, the patient's death could not have been prevented, since the fishbone was still there. On the other side, operating the patient and blindly searching for the foreign body would have been unsuccessful and also dangerous. I have following comments, before the manuscript can be accepted for publication:

1. the authors claim that vertebral artery injury from a fishbone has not been reported. This is not true as Chou et al report 3 cases of spontaneous vertebral artery dissection, the third being observed in a patient after fish bone swallow (PMID: 21739395). Please cite this article, as it is highly relevant, and revise your text accordingly (i.e. revise/omit the phrase "cases of vertebral artery pseudoaneurysm caused by a fishbone have not been reported before"). Even though, strictly speaking, pseudoaneurysm differs from dissection as the former is a collection of blood between the two outer layers of an artery and the latter a collection between the two inner layers, practically it is the same thing (treated in the same manner as well).

Response: Thank you for your suggestion. We agree that vertebral artery injury from a fishbone has been reported before, however, to our knowledge, it is the first case of vertebral artery pseudoaneurysm caused by a fishbone. Since pseudoaneurysm and dissection are practically the same thing, we have added the article written by Chou et al (PMID: 21739395) and modified our description in the "Discussion" section.

2. Similarly, one more study reports vertebral artery dissection due to esophageal foreign body (metallic pin) migration and needs to be cited too (PMID: 25018833).

Response: This article summarizes and focuses on vertebral artery injuries caused by fishbone, rather than other esophageal foreign bodies. Other esophageal foreign bodies that have been reported to cause vertebral artery injuries include toothpicks, chicken bones and etc, which are not expounded in this article.

3. Can the authors roughly estimate when did the second pseudoaneurysm occur? Was it at the day that it became hemodynamically relevant (i.e. the 9th day)?

Response: The second pseudoaneurysm wasn't discovered until the patient became hemodynamic instability again on the 9th day and the enhanced chest CT was performed thereafter. In this case, we

can only roughly estimate that the the second pseudoaneurysm occurred between the 6th day and 9th day after admission.

Editorial Office's comments

Science Editor:

1. Scientific quality: The manuscript describes a case report of the catastrophic vertebral artery and subclavian artery pseudoaneurysms. The topic is within the scope of the WJG. (1) Classification: Grade A; (2) Summary of the Peer-Review Report: The authors describe a patient with multiple vascular injuries due to migration of a swallowed fishbone. This is a well-written manuscript which delivers a clear message. The authors claim that multiple fishbone-related vascular injuries have not been reported. A thorough literature search confirms this statement. The manuscript emphasizes the necessity to find and remove the fishbone as soon as possible, which is of great clinical significance. However, there are some issues should be addressed. The authors claim that vertebral artery injury from a fishbone has not been reported. The questions raised by the reviewers should be answered; and (3) Format: There are 2 figures. A total of 10 references are cited, including 1 reference published in the last 3 years. There are no self-citations.

2. Language evaluation: Classification: Grade A. A language editing certificate issued by AJE was provided.

3. Academic norms and rules: The authors provided the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement, and the written informed consent. The authors need to fill out the CARE checklist with page numbers. No academic misconduct was found in the CrossCheck detection and Bing search.

4. Supplementary comments: This is an unsolicited manuscript. The study is without financial support. The topic has not previously been published in the WJG. The corresponding author has not published articles in the BPG.

5. Issues raised:

(1) I found no "Author contribution" section. Please provide the author contributions;

Response: We have added the "Author contribution" section on the title page.

(2) I found the authors did not provide the original figures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

Response: We have put all our figures in a separated PowerPoint document, which is uploaded together with the revised manuscript and meets the special requirements for figures.

(3) I found the authors did not add the PMID and DOI in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout;

Response: We have added the PMID and DOI for each reference article and listed all authors of the reference. However, the DOI citation number of Reference 9 and Reference 10 can not be retrieved.

(4) I found the "abstract" section did not meet our requirements. Please re-write the "abstract" section;

Response: We have re-written the "abstract" section according to the format requirements.

(5) I found the "Case Presentation" did not meet our requirements. Please re-write the "Case

Presentation” section, and add “FINAL DIAGNOSIS”, “TREATMENT”, and “OUTCOME AND FOLLOW-UP” section to the main text, according to the Guidelines and Requirements for Manuscript Revision.

Response: We have re-written the “Case Presentation ” section according to the format requirements and added “FINAL DIAGNOSIS ”, “TREATMENT ”, and “OUTCOME AND FOLLOW-UP ” section to the main text.

6.Re-Review: Required.

7.Recommendation: Conditionally accepted.

We thank the Editorial Board of *World Journal of Clinical Cases* and the reviewers again for your time and comments. If we can be of any further assistance, please feel free to contact me by e-mail (21118139@zju.edu.cn).

Respectfully,

Kai Jin