

1.

Page 3). Please insert a reference for the sentence “ Acute cerebellitis is usually a benign disease”

Reference was added.

2.

Page 3). Does she have a history of mumps immunization before onset?

Yes she had a history of mumps immunization 10 days before the acute cerebellitis onset.

3.

state in the Case Report. Page 4, Fig. Legends). Use “. ” and “ , ” correctly. Ex) 0,9 ppm to 0.9 ppm

done

4.

Figure 1 a, 1b, and 1C) Please point the lesions by ? or ?.

done

5.

Figure 2. Please explain which peak show NAA, Creatine and Choline, respectively.

done

6.

Line 3: replace suffer severe forms “with brainstem involvement” by related to brainstem compression.

done

7.

Line 6: replace “etiology” by etiopathology

done

8. Line 11: Ill-defined hypodense lesion

Line 16: replace “and producing cerebellar mass-effect” by with mass effect

Line 19: Magnetic Resonance Spectroscopy showed mildly reduced NAA/Creatine ratio with doublet of lactate peak at 1.3ppm.

done

9.

Line 4: replace by Several infectious agents associated with cerebellitis were reported in literature Line 5: Rubella and not rubeola

done

10.

Important to discuss the role of Magnetic Resonance Spectroscopy (MRS) in the differential diagnosis between tumour and cerebellitis and if MRS can be prognosis tool.

Magnetic resonance spectroscopy is a valuable tool to exclude tumor by showing normal choline/creatine ratio.

11.

Figure 2 : Magnetic Resonance Spectroscopy (TE=35ms) showed mildly reduced NAA/Creatine and normal Choline/Creatine ratios. Doublet of lactate peak (1.3 ppm) was detected.

Changed in the case report