

July 30, 2014



Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 11600-review.doc).

Title: Acute idiopathic pancreatitis in pregnancy: A case study

Author: Ji Yeon Kim, Sung Hoon Jung, Hyung Wook Choi, Dong Jin Song, Cheol Yoon Jeong, Dong Hyun Lee, Il Soon Whang

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 11600

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

- (1) To assess if there was or wasn't initial hemoconcentration indicate if the hematocrit result corresponds to a sample taken pre or post intravenous fluids administration and what was the result for this test at both instances. Include the red blood cell count.

Answer

We corrected the laboratory findings as you suggested. The hematocrit result corresponded to the sample taken before and after intravenous fluids treatment respectively.

- (2) Discuss what would have been the parameters (including results) that would have indicated a non-conservative management and which management alternatives would you have had in place to assist the patient if instead of a successful recovery the case would have evolved to a moderate or severe acute pancreatitis.

Answer

If a patient gets 3 point or more at RANSON criteria and does not improve symptoms after 2-3 days of conservative management, we can assume that it was moderate to severe pancreatitis and need to try non-conservative treatment (e.g. MRCP, non-radiation ERCP).

We revised these contents additionally at discussion section and added references no.14 and 15.

- (3) The full detail regarding laboratory tests should only be included in the table (Table 1). These don't have to be enumerated and described in the text.

Answer

We corrected the text and Table 1.

- (4) Recently, the incidence of pregnancy-associated AP was found as 2.27‰ (1). The maternal and fetal mortality is very high. The most common clinical presentations are abdominal pain (89.47%) and vomiting (68.42%). The authors claim that there has been no case report of

idiopathic acute pancreatitis in pregnancy so far. However, I could find one in a very quick pub-med investigation (2). So they should say that a few cases or a case of idiopathic acute pancreatitis in pregnancy was reported (they may perform a detailed research on internet).

Answer

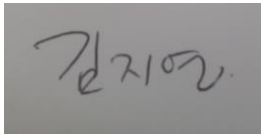
The incidence of acute pancreatitis in pregnancy that we quoted was approximately 1 in 1,000 to 3 in 10,000 births. As you recommended, recently Zhang et al. reported the incidence of pregnancy-associated acute pancreatitis was found as 2.27%. Because the recent report was marked by permillage, we thought that there was similar incidence between the past and recent reports. We added the recent incidence as you mentioned in the text.

We also researched on internet about the incidence and causes of acute pancreatitis in pregnancy and found that 4 papers mentioned it. The portion of idiopathic cause of acute pancreatitis in pregnancy was approximately 10~15%. But, there was no single case report which was about idiopathic acute pancreatitis in pregnancy.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

A rectangular box containing a handwritten signature in dark ink. The signature appears to be '김지연' (Kim Jiyeon) written in a cursive style.

Ji Yeon Kim

1st Dept. of Medicine

Department of Internal Medicine, Cheil General Hospital & Women's Healthcare Center, Kwandong University College of Medicine, Seoul, KS013, Korea

Tel: +82-10-54575354

E-mail: tzsche0425@gmail.com