Format for ANSWERING REVIEWERS

April 21, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 2264-edited.doc).

Title: Anterior communicating artery aneurysm associated with duplicated hypoplastic right A1 segment

Authors: Ioannis N. Mavridis, Sophia Anagnostopoulou

Name of Journal: *World Journal of Neurology*

ESPS Manuscript NO: 2264

The manuscript has been improved according to the suggestions of reviewers and editor.

Reviewer 1
(Very good classification, Language evaluation: Grade A: priority publishing)
Thank you for submitting you interesting article.

We would like to thank the reviewer for finding our article "interesting".

Reviewer 2
(Good classification, Language evaluation: Grade A: priority publishing)
The article is well written with good pictures and overall acceptable discussion. However, the main topic--duplicated A1, is mundane (4% prevalence). ACom aneurysms are likewise common even with the frontal lobe indentation.

We would like to thank the reviewer for finding our article "well written with good pictures and overall acceptable discussion". We agree with them that A1 duplication as well as ACom aneurysms are not rare findings. However, the main topic of our article is the coexistence of A1 duplication, A1 hypoplasticity, ACom aneurysm and frontal lobe indentation.

Reviewer 3
(Good classification, Language evaluation: Grade A: priority publishing)
This is a well written manuscript with very detailed literatures review and beautifully presented dissection photos. However, it is well known that any developmental anomaly or variation in the circle of Willis can lead to increased risk of aneurysm formation, due to alternation in hemodynamic flow, stress response as well as weakened adventitial wall. Duplication of A1 segment is not common itself but is commonly associated with anterior communicating artery aneurysm which is well reported and has no additional clinical value, albeit the detailed literatures review. In addition, the finding of indentation onto cortical surface is actually predictable and expected when it becomes sizeable, not unusual as described by the author. This constitutes the major problem of this case report.

We would like to thank the reviewer for finding our manuscript "well written with very detailed literatures review and beautifully presented dissection photos". We agree with them that "any

developmental anomaly or variation in the circle of Willis can lead to increased risk of aneurysm formation, due to alternation in hemodynamic flow, stress response as well as weakened adventitial wall". We did not described as "unusual" the finding of indentation onto cortical surface but the fact that our case combined "hypoplastic duplicated A1 segment, asymptomatic ACoA aneurysm and remarkable cortical surface depression".

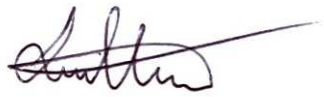
Editor

Please provide language certificate letter by professional English language editing companies (Classification of manuscript language quality evaluation is B).

All three reviewers evaluated our article's quality of language as 'Grade A'. However, we send you a language certificate letter.

Finally, we would like to thank you again for publishing our manuscript in the *World Journal of Neurology*.

Sincerely yours,



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