

We would like to thank the reviewers for their insightful comments. We modified our manuscript according to the suggestions.

Reviewer's code: 00214240:

*Interesting case report about a very rare condition the knowledge of this condition , could be important weak point is of course that the aspirate has not been evaluated. no information on eosinophils are available.*

In the acute setting of the coronary syndrome, no thrombus was kept for pathological analysis that would elucidate better the pathophysiologic mechanisms. However, the whole case scenario, and the oral food challenge test were suggestive of the Kounis syndrome. Information about eosinophils count was added to the manuscript.

Reviewer's code: 02991469

*The manuscript entitled "Early stent thrombosis secondary to food allergic reaction: Kounis syndrome following rice pudding ingestion." by Dr. Tzanis et al. describes Kounis syndrome (anaphylactic reaction) induced by food allergy. Comments: 1. This manuscript is well-written and an interesting case report with addressing type III Kounis syndrome (anaphylactic reaction) induced by food allergy. 2. Page 3, Line 28: Please indicate the elevated troponin confirmed in this case, troponin T or I? 3. Please describe the findings from aspirated coronary thrombus, if possible. Aspirated materials help us to understand the mechanism of Kounis syndrome (JACC Cardiovasc Interv 2014;7:e173). Would the author cite this paper in Page 5, Line 31 In this type, the thrombus is infiltrated by eosinophils and/or mast cells.*

Type of troponin (Troponin T) was added to the manuscript. As noted in the section of "Pathological analysis" of the manuscript no thrombus was kept for pathological analysis.