São Paulo, June 22nd, 2017

Director Yuan Qi

Science Editor, Editorial Office

World Journal of Clinical Cases

Dear Director,

Please find attached the revised version of our manuscript (Nº 34012) and all the required documents.

We have updated the manuscript according to the Guidelines, Requirements for Manuscript Revision-Case Report, editor's suggestions and peer-reviewers' comments.

We declare that a professional English language editor (Irish native) has revised the language of our case-report and graded it as A (certificate is attached).

The modifications inserted in the manuscript are highlighted in **blue**.

Additionally, our case report and the language evaluation were classified as Grade A (excellent) by the peer-reviewer (ID number: 01809232). Nevertheless, the reviewer solicited a "minor revision".

We thank you very much for your collaboration and reviewer's suggestions.

We hope this revised version has reached the high standards of *World Journal of Clinical Cases* and that it will be interesting for its readers.

Thank you very much in advance for your kind consideration.

Paulo C J L Santos, PhD.

Laboratory of Genetics and Molecular Cardiology, Heart Institute, University of São Paulo

Answers to Editor:

Dear Yuan Qi, Vice Director, Editorial Office,

We are very sorry for our manuscript have not been accepted for publication in the WJG, however we are pleasure for the offer of publication in the WJCC. Our decision is that we are willing to publish our manuscript (ESPS Manuscript NO: 34012) in WJCC.

Reviewer Comments to Author:

General Comments

The study is a case report of a juvenile hemochromatosis patient due to a HAMP mutation. The authors demonstrate successful management of this patient with a combination of classical phlebotomy with iron chelation therapy using deferasirox. This approach led to a significant decrease in iron burden and, moreover, to improvement of clinical symptoms. The manuscript is well-written. The findings are convincing and have important clinical implications. Unfortunately, the authors "were not able to perform MRI measurements before and after inclusion of the deferasirox as an adjuvant", but measured liver iron content after combined therapy and found physiological values. It would be interesting to provide data on cardiac iron load before (if available) and after treatment.

Answer to Reviewer:

Dear Reviewer,

We are pleasure for have received such an encouraged feedback. As you have mentioned, we have reported a clinical case of a patient with a very rare disorder: juvenile hemochromatosis due to HAMP mutation (g.47G>A). We presented a successful combined therapy for the iron overload and symptoms caused by the JH condition, performed with the conventional phlebotomies and the iron chelator deferasirox as an adjuvant. We recognize the great importance of providing MRI measurements and data on cardiac iron load before and after treatment. Unfortunately, it is a limitation of our clinical report and we have not been able to provide those data since it was not available. We thank you very much for your consideration.

Best regards,

Paulo C J L Santos, PhD.

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