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ANSWEING REVIEWERS

November 4, 2019

Dear professor,

Title: Pulmonary Embolism and Deep Vein Thrombosis Caused by Nitrous Oxide Abuse:
A Case Report

Author: Wen Sun, Ji-ping Liao, Yan Hu, Wei Zhang, Jing Ma, Guang-fa Wang

Name of journal: World Journal of Clinical Cases

Manuscript NO: 50629

The following is our point-to-point reply based on three reviewers' comments. These comments are listed and italicized to distinguish authors' responses for reading as below.

Comments from the reviewer 02669684: "Idea is good and work is well written."

Response: We thank the reviewer's positive comments.

Comments from the reviewer 00051373: "An interesting case report but something needs to be revise as below: 1. Reduce the number of citation less than 10 references as possible 2. Remove all of the citations greater than 10 to 20 years at least 3. Lacking of a conventional CXR PA view 4. Language revision such as sudder chest pain etc. (may change to sudden onset chest pain)."

Response: 1) We tried to reduce some outdated citations and avoid excessive references in a single citation. However, the guidelines for manuscript suggested that case reports

generally have 30-60 references and finally there are 19 importance citations supporting arguments in this case. 2) In theory, conventional CXR should be used as a routine examination for the identification of chest pain. But in this case, we considered CTPA directly because of the typical symptoms, signs, ECG results and laboratory examinations such as d-dimer. 3) Our terms were changed and became more professional.

Comments from the reviewer 03475479: "This case report was interesting, but several issues listed below remained unclear. 1. The level of folate, Vit B12 and Vit B6 should be shown. 2. Body weight and height should be described. 3. Authors should mention or discuss whether the patient have the cause leading to Vit B12 deficiency. 4. Authors should describe more detail whether the patient had genetic or secondary coagulative disorder or not."

Response: 1) The level of folate and Vit B12 were added as well as the body mass index. The level of Vit B6 was not examined, because the HHcy was treated successful only by folate and the Vit B6 did not play the key role in mechanism. 2) The patient was treated by Vit B12 with clinical experience because of peripheral neuropathic presentation but had no exact result of Vit B12. 3) The patient had no evidence of acquired thrombophilia, mainly antiphospholipid antibody syndrome, neither nor congenital thrombophilia, such as deficiency of protein c, protein s and antithrombin III. We described details in laboratory examinations.