

Dear Editor,

Thank you for carefully reviewing our manuscript previously titled “Granulomatosis with polyangiitis presenting as high fever with diffuse alveolar hemorrhage and otitis media: A case report and literature review” for possible publication in the World Journal of Clinical Cases. We are grateful to you and your reviewers for their constructive critique. We have revised the manuscript, highlighting our revisions in red, and have attached point-by-point responses detailing how we have revised the manuscript in response to the reviewers' comments below.

Reviewer Comments:

Reviewer #1: Granulomatosis with Polyangiitis (GPA) is a rare rheumatic disease with diverse manifestations. Diffuse alveolar hemorrhage is a serious complication and its treatment is challenging. In this case, the diagnosis of GPA was solid and the patient's condition was critical. Fortunately, the treatment was successful. However, some questions require answers. 1. The treatment needs more details, such as the frequency of CTX and the duration of IVIG being used. 2. The Fortin PM's study mentioned in the discussion gave the result that the IVIG group results in a remarkable increase in total adverse events. Although the two groups have no remarkable difference on mortality, serious adverse events, time to relapse, open-label rescue therapy, and infection rates, the evidence to support the advantage of IVIG is still weak. In view of this, I suggest a minor revision.

Response: 1. The details of treatment have been added to our article, such as the starting and ending time of methylprednisolone, IVIG, and cyclophosphamide. 2. We have added the evidence to support the advantage of IVIG, such as a study of 22 people with Wegener's granulomatosis or microscopic polyangiitis shows that after additional therapy with IVIG, the complete remission ratio can attain 72.7%, that figure climbed to 77.3% after 24 months. And the Etienne Crickx's retrospective study supports this claim. In addition, in Koike H's study, the practicality and effectiveness of IVIG treatment for peripheral neuropathy has been further verified.

about LANGUAGE QUALITY

Response: . We have made iterative changes of the English language of manuscript as far as possible to meet the requirements of the journal.

EDITORIAL OFFICE'S COMMENTS

(1) Science editor: 1 Scientific quality: The manuscript describes a case report of the granulomatosis with polyangiitis presenting as high fever with diffuse alveolar hemorrhage and otitis media. The topic is within the scope of the WJCC. (1) Classification: Grade B; (2) Summary of the Peer-Review Report: In this case, the diagnosis of GPA was solid and the patient's condition was critical, fortunately, the treatment was successful. The questions raised by the reviewers should be answered; and (3) Format: There are 2 tables and 4 figures. A total of 19 references are cited, including 3 references published in the last 3 years. There are no self-citations. 2 Language evaluation: Classification: Grade B. A language editing certificate issued by MedSci was provided. 3 Academic norms and rules: The authors provided the written informed consent. No academic misconduct was found in the CrossCheck detection and Bing search. 4 Supplementary comments: This is an unsolicited manuscript. No financial support was obtained for the study. The topic has not previously been published in the WJCC. 5 Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor; and (2) The “Case Presentation” section was not written according to the Guidelines for Manuscript Preparation. Please re-write the “Case Presentation” section, and add the “FINAL DIAGNOSIS”, “TREATMENT”, and “OUTCOME AND FOLLOW-UP” sections to the main text, according to the Guidelines

and Requirements for Manuscript Revision. 6 Re-Review: Required. 7 Recommendation: Conditional acceptance.

Response: . The article has been modified according to the Guidelines and Requirements for Manuscript Revision. The original pictures have been arranged in a PowerPoint called 60377-Figures and the original figure documents in a document called 60377-Tables.

(2) Editorial office director: have checked the comments written by the science editor.

Response: The article has been modified according to the Guidelines and Requirements for Manuscript Revision

(3) Company editor-in-chief: 正确写法: 广西壮族自治区 Guangxi Zhuang Autonomous Region. I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. However, the quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>.

Response: We have provided the English Language Certificate (a certificate of MedSic) in the attachments.

Yours Sincerely,

Jianghua Liu, Department Of General Practice, The Second Affiliated Hospital Of Guangxi Medical University, Guangxi Zhuang Autonomous, China; Department Of General Practice, General Practice School Of Guangxi Medical University, Guangxi Zhuang Autonomous, China

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Best regards,

Lian-Sheng Ma, Company Editor-in-Chief, Editorial Office

Baishideng Publishing Group Inc

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

Telephone: +1-925-399-1568

E-mail: l.s.ma@wjgnet.com

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