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ANSWER TO THE REVIEWER

Thank you very much for your valuable comments on this article, I will answer your questions below. Indeed, according to CLSI protocol, it is necessary for this case to undergo drug susceptibility test before the treatment plan is determined. However, this case developed repeated fever upon admission, and the body temperature was not well controlled by conventional anti-infective treatment. In order to perform the operation as soon as possible, according to its symptoms and lumbar MRI results, We give oniazid + rifampicin+ etanercept+ pyrazinamide for diagnostic anti-tuberculosis treatment and levofloxacin for anti-infection treatment. During lumbar spine surgery, we collected pus specimens from the patient's lesions to complete the culture of tuberculosis bacilli. The culture suggested non-tuberculous mycobacteria, because this bacteria has a long growth time, we consider slow-growing mycobacteria. Because of the limited laboratory conditions in our hospital, we did not have corresponding reagents to improve the identification and drug susceptibility of bacteria. We also sought the help of other hospital laboratories, and there are no such reagents. Therefore, it is very regrettable that the drug susceptibility test has not been perfected. The unique 16S rRNA gene sequence of *Mycobacterium paragordona* is approximately 99% close to that of Gordon's *Mycobacterium*, so we treat it according to the common treatment regimen of Gordon's *Mycobacterium*.