

Dear Editor,

Thank you for carefully reviewing our manuscript previously titled “Y-shaped shunt for the treatment of Dandy-Walker syndrome combined with giant arachnoid cyst : a case report” 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.

Thank you for your consideration and further review of our manuscript. Please do not hesitate to contact us with any further questions or recommendations.

Yours Sincerely,

Qiang Li

Reviewer Comments:

Reviewer #1:

Response:

#1 The diagram and description have been supplemented

#2 The original drawing has been explained in detail

#3 The conclusion has been very concise, so no further deletion has been made

Thanks to the reviewers for their valuable suggestions, we think the conclusion of the case may be concise enough.

Reviewer #2:

1. Staggering (staggering gait- please specify), left to right during walking and ataxia- what is the difference?

Response:

lean to right during walking but not left to right, This means leaning to one side when walking.

2. Please elaborate on the “etc” in the case summary.

Response:

Physical examination revealed increased head circumference, anterior fontanelle closed, unstable standing, staggering, lean to right during walking and ataxia.

3. Please change the wording of the case summary, simplify

Response:

I think it's very concise

We think that the summary of the case may be concise enough, and we still thank the reviewers for their sincere suggestions.

4. Introduction should be to the point, do elaborate on the different types of treatment

and the protocols followed in recent times for the same.

Response:

This part has been introduced in detail in the discussion

We apologize for not being able to make the reviewer clarify what we want to express, although this part has been elaborated in the discussion section.

5. In the case presentation, clarify the importance of the previous history (as staggering was not mentioned in the presenting complaints then)

Response:

The first sentence of the case summary refers to the staggering

6. The chronology of said events are a little unclear; did the staggering come first or the fever.

Response:

Because it is a 1-year-old child, the family will not notice the child's staggering.

We found it after admission.

7. The imaging gives us the answer that it is DWM, but it is important to give a comprehensive description of the case.

Response:

The diagnosis of DWM depends on medical imaging

8. The line about “CP shunt/VP shunt done alone” would have us believe that both the procedures were performed but neither was effective. The decision to offer a combined shunt preoperatively should be conveyed properly (to clarify that it was not an intraoperative decision or was it?)

Response:

Neither the cysto-peritoneal shunt (C-P shunt) nor the ventriculo-peritoneal shunt (V-P shunt) alone solved the hydrocephalus at the same time, and the patient

underwent a combination of supratentorial-infratentorial shunt for hydrocephalus and isolated cysts.

9.The “child’s mental state was improved significantly”, if you are commenting about the mental state of the child post operatively please tell about the preoperative period also (it has improved from?)

Response:

Already added:The child was depressed before operation

Dear editor, I'm very sorry to tell you, reviewer #2 have too many detailed questions that I have tried my best to answer. Maybe some questions are caused by the lack of understanding of the articles by the reviewer. I'm sorry I can't answer them one by one.

Reviewer #3:

1.case summary: please mention the child age, gender, and past history case presentation

Response:

These details have been mentioned in the article case summary

2.treatment: please correct this statement " The patient was given a combination of supratentorial-subtentorial cysts the patient was given a combination of supratentorial-subtentorial cyst shunt."

Response:

The patient underwent a combined shunt of supratentorial hydrocephalus and infratentorial giant solitary arachnoid cyst.

Reviewer #4:

There is no need for special modification. We sincerely thank the reviewer for his criticism and guidance.

Dear editor,

References have been added. I'm very sorry to tell you that I searched a lot of literature, but I didn't find the literature, demographic characteristics and follow-up of "Y" valve shunt.