

Answer to the Reviewer #1

Thank you for your kind consideration and thoughtful comments on our manuscript.

We look forward to your decision on the revised manuscript.

Yours sincerely.

Answer to the Reviewer #2:

Thank you for your thoughtful and kind comments on our manuscript.

We have carefully considered your comments and have tried our best to answer your questions.

The revised contents are indicated in red color in the resubmitted manuscript.

Specific Comments to Authors: I'm honored to be invited to review the article titled Acute esophageal obstruction after ingestion of psyllium seed husk powder: A case report. In the manuscript, a case of acute esophageal obstruction caused by bezoar after ingestion of psyllium seed husk powder was reported.

The case is of creative significance for the bezoar located near the gastro-esophageal junction and comorbid Parkinson's disease, which calls for appropriate regimen in the form of treatment and health supplement.

After reviewing the manuscript, I have some questions.

1. First, for the 76-year-old patient, there is no specific description of the medication history and the severity of the fundamental disease, which makes it difficult to evaluate.

Answer

Thank you for your comment.

The patient was diagnosed with Parkinson's disease approximately 3 years before visiting the emergency department (ED). During his first visit for Parkinson's disease symptoms to our department of neurology, our neurologist estimated a modified Hoehn and Yahr scale stage 1.5, and the patient started taking Stalevo (125 mg of levodopa, 31.25 mg of carbidopa and 200 mg of entacapone) twice a day. Two months later, Stalevo was increased to three tablets per day, and the patient's symptoms improved fairly. After 7 months of follow-up, he decided to consult a neurologist near his house for the management of Parkinson's disease; therefore, it was impossible to confirm whether it was continuously managed after that. When he visited the ED at this time, we had no observations on his Parkinson's disease course during the last 2 years;

therefore, continuity of medication use or accurate disease progress status were not identified. We thought that if he voluntarily stopped taking the drug for Parkinson's disease, its severity may have been progressed, although this was not clearly identified. Further, we speculated that he started taking psyllium seed husk powder as a laxative because of the worsening of constipation due to a decrease in GI motility due to autonomic nervous system dysfunction in Parkinson's disease.

Considering your comments, we have revised the *history of past illness*, lines 64-72. Additionally, we added the contents of the *Personal and family history*.

[Content of revision]

He said that he sometimes suffered from dyspepsia or dysphagia after taking the powder previously as well, but the current symptoms were the most serious.

➔ He said that **he sometimes** suffered from dyspepsia or dysphagia **after taking the powder** previously as well, but the current symptoms were the most serious.

➔ *Personal and family history*

He was diagnosed with Parkinson's disease at our department of neurology 3 years before visiting the ED and started taking Stalevo (125 mg of levodopa, 31.25 mg of carbidopa, and 200 mg of entacapone) twice a day. After 7 months of follow-up, he decided to consult a neurologist near his house for the management of Parkinson's disease. Additionally, he was taking psyllium seed husk powder, about 5 g with water per day, for constipation, purchased from a drugstore without a prescription.

2. Plus, it lacks the amount of psyllium seed husk powder intake and the usual medication dosage, which makes it debatable whether it can be defined as bezoar.

Answer

Thank you for your comment.

We could not identify the usual medication dosage because he was purchasing psyllium seed husk powder for constipation at a drugstore without a prescription. However, according to his statement, approximately 5 g of the powder was swallowed with water per day. Additionally, sometimes he suffered from dyspepsia or dysphagia after taking powder, the current symptoms were the most serious. He did not eat any other solid foods until symptoms appeared at this

time, and symptoms were developed not long after taking powder. In this regard, we believe that the bezoar was due to psyllium seed husk powder.

Considering your comments, we have revised the *history of past illness*, lines 64-72. Additionally, we added the contents of the *Personal and family history*.

[Content of revision]

He said that he sometimes suffered from dyspepsia or dysphagia after taking the powder previously as well, but the current symptoms were the most serious.

➔ He said that **he sometimes** suffered from dyspepsia or dysphagia **after taking the powder** previously as well, but the current symptoms were the most serious.

➔ *Personal and family history*

He was diagnosed with Parkinson's disease at our department of neurology 3 years before visiting the ED and started taking Stalevo (125 mg of levodopa, 31.25 mg of carbidopa, and 200 mg of entacapone) twice a day. After 7 months of follow-up, he decided to consult a neurologist near his house for the management of Parkinson's disease. Additionally, he was taking psyllium seed husk powder, about 5 g with water per day, for constipation, purchased from a drugstore without a prescription.

3. It would be better if there is a componential analysis of the foreign body in the esophagus.

Answer

Thank you for your comment.

Unfortunately, componential analysis was impossible in our hospital. However, the patient said that he sometimes suffered from dyspepsia or dysphagia after taking psyllium seed husk powder previously, did not eat any other solid foods until symptoms appeared at this time, and symptoms were developed not long after taking powder. In this regard, we believe that the bezoar was due to psyllium seed husk powder.

Considering your comments, we have added the contents in the **Discussion**, after lines 138-143.

[Content of revision]

Our patient had Parkinson's disease, which may have collaterally contributed to the formation

of the bezoar due to psyllium seed husk.

→ Our patient had Parkinson's disease, which may have collaterally contributed to the formation of the bezoar due to psyllium seed husk. Additionally, he had sometimes experienced dyspepsia or dysphagia after taking psyllium seed husk powder previously, did not eat any other solid foods until symptoms appeared, and symptoms developed not long after taking powder. In this regard, we believe that his bezoar was due to psyllium seed husk powder, although componential analysis was impossible in our hospital.

4. More importantly, the emphasis should be put on the dosage and concentration of the medication but not a specific medication in patients with esophageal motility disorders. This case is presented just because the foreign body is made of the psyllium seed husk powder, which may not be representative and generalizable.

Answer

Thank you for your comment.

We agree with your comment. Unfortunately, there were limitations in identifying the specific dosage and concentration of psyllium seed husk powder because he was purchasing it at a drugstore without a prescription. The only information we could obtain was that he was taking approximately 5 g with water per day. However, psyllium seed husk powder is a widely used bulk laxative that can be administered without prescription. We believe that this case report has some significance in that using these specific regimens may cause unexpected problems in people with certain comorbidities.

Considering your comments, we revised the **Discussion**, lines 156-163.

[Content of revision]

Bulk-forming laxative regimens may also increase the risk of esophageal bezoar formation in patients with functional esophageal disorders, such as those with Parkinson's disease.

→ In addition to psyllium hull powder, there are various bulk laxatives. Additionally, the dosage and concentration of the medication may be more important than the type of regimen in patients with esophageal motility disorders. However, psyllium seed husk

powder is a widely used bulk laxative, and some specific regimens can cause unexpected problems in people with certain comorbidities. Therefore, we believe that uncontrolled bulk-forming laxative regimens may increase the risk of esophageal bezoar formation in patients with functional esophageal disorders, such as those with Parkinson's disease.

5. There are also some grammar mistakes such as repeated words and some grammatical disorders, which could be polished. For the above, I suggest minor revision.

Answer

Thank for your comment. Based on your comments, we sought professional assistance from an English editing company (<https://www.editage.co.kr>) and have gotten our manuscript proofread by a native English speaker and editor. We have attached the certificate of English language editing.

Thank you for your kind consideration of our manuscript.

We look forward to your decision on the revised manuscript.

Yours sincerely.

Answer to the Professor Jin-Lei Wang,

Company Editor-in-Chief,

World Journal of Clinical Cases

Thank you for your thoughtful and kind comments on our manuscript.

We have carefully considered your comments and have tried our best to response your requests.

Specific Comments to Authors and answers

1. Before its final acceptance, the author(s) must provide the Signed Informed Consent Form(s) or Document(s) of treatment. For example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc.

Answer

Thank for your comment.

Considering your comments, we attach the document of treatment, the formal endoscopic findings paper by our gastroenterologist when the patient visited at ED. Identifiable information such as the name of the hospital, patient's name, hospital ID and etc. is erased.

2. Please provide the original figure documents.

Answer

Thank for your comment.

Considering your comments, we attach the original figure documents, from the Original_Fig1A to the Original_Fig2B.

3. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor.

Answer

Thank for your comment.

Considering your comments, we attach the figures using PowerPoint, named as Figures.pptx.

4. Please upload the approved grant application form(s) or funding agency copy of any approval document(s).

Answer

Thank for your comment.

Considering your comments, we attach the approved grant application form.

5. In addition, according to the (2) Running title of 5. ABBREVIATIONS, the Running title was shortened in 6 words.

[Contents of revision]

Esophageal obstruction after psyllium seed husk ingestion

➔ [Esophageal obstruction after psyllium seed ingestion](#)

Thank you for your kind consideration of our manuscript.

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Yours sincerely.

Answer to the *Science editor*

Thank you for your thoughtful and kind comments on our manuscript.

We have carefully considered your comments and have tried our best to response your requests.

The revised contents are indicated in blue color in the resubmitted manuscript.

Specific Comments to Authors:

1. There are also repeated words in the abstract. Minor revision suggested

Answer

Thank for your comment.

Based on your comments, we revised the abstract according to the English editing.

[Contents of revision]

BACKGROUND

Bezoar is a mass of hardened external material found in the gastrointestinal (GI) tract. It may form anywhere in the GI, but esophageal bezoar is rare because of short esophageal transit time. Psyllium seed husk is an indigestible natural derivative and widely used as an herbal laxative. We report a case of we report a case of acute esophageal obstruction caused by bezoar after ingestion of psyllium seed husk powder.

- ➔ Bezoar is a mass of hardened external material found in the gastrointestinal (GI) tract. It may form anywhere in the GI **tract**, but esophageal bezoar is rare because of **the** short esophageal transit time. Psyllium seed husk is an indigestible natural derivative **that is** widely used as an herbal laxative. **Herein**, we report a case of acute esophageal obstruction caused by **a** bezoar after ingestion of psyllium seed husk powder.

CASE SUMMARY

A 76-year-old patient with Parkinson's disease visited the emergency department with swallowing difficulty approximately 10 h after ingesting psyllium seed husk powder. Symptoms began a few hours after the ingestion and progressed to severe dysphagia. There were no abnormal findings on simple radiography. However, a computed tomography scan

revealed an approximately 2.0 cm × 2.5 cm mass located near the gastro-esophageal junction. The mass was removed using an endoscopic capturer after grinding. Esophageal bezoars may cause life-threatening complications. Patients with Parkinson's disease may have esophageal motility dysfunction, which may increase esophageal transit time. Since our patient had Parkinson's disease, this effect may have contributed to the formation of the bezoar.

➔ A 76-year-old male with Parkinson's disease visited the emergency department with swallowing difficulty approximately 10 h after ingesting psyllium seed husk powder. Symptoms began a few hours after ingestion and progressed to severe dysphagia. There were no abnormal findings on simple radiography. However, a computed tomography scan revealed an approximately 2.0 cm × 2.5 cm mass located near the gastro-esophageal junction. After grinding, the mass was removed using an endoscopic capture net. Esophageal bezoars may cause life-threatening complications. Patients with Parkinson's disease may have esophageal motility dysfunction, which may increase esophageal transit time. Since our patient had Parkinson's disease, this effect may have contributed to the formation of the bezoar.

CONCLUSION

Attention should be paid to using bulk-laxatives, and appropriate specified regimen will need when marketed as a dietary supplement.

➔ Attention should be paid to using bulk-laxatives, and an appropriate specified regimen will be needed when marketed as a dietary supplement.

2. Language Quality: Grade B (Minor language polishing)

We have performed an English editing service (<https://www.editage.co.kr>) after revising the manuscript. We attached the certification of English editing.

3. In addition, according to the (2) Running title of 5. ABBREVIATIONS, the Running title was shortened in 6 words.

[Contents of revision]

Esophageal obstruction after psyllium seed husk ingestion

→ [Esophageal obstruction after psyllium seed ingestion](#)

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