

July 20, 2022

Editors-in-Chief

*World Journal of Clinical Cases*

Dear Editor and reviewers:

Thank you for your invaluable comments and advice. Your suggestions and guidance have helped us immensely in revising and improving the overall quality of our manuscript. We have responded to all your comments carefully and made revisions in accordance with your suggestion, which we hope meet your expectations. The revised text is marked in red in the revised manuscript. The revisions in the manuscript and the response to the reviewers' comments are presented below.

**Response to the reviewer's comments:**

**Reviewer #1:**

Thank you for taking the time to carefully review our manuscript. We really appreciate your generous comments and suggestions. Please find my revisions in the re-submitted files. We have amended the relevant sections in the manuscript. Below, we have responded to your comments in a point-by-point manner.

I please provide list of abbreviations used or provide expanded and abbreviated form for the first time appearance in the text.

**Response: Thank you for your careful review. We apologize for not providing a list of abbreviations used or expanding the abbreviated form at first use in the text. We are extremely grateful to you for pointing this out.**

Abbreviations: ALT, alanine transaminase; AST, aspartate transaminase; BNP, N-terminal brain natriuretic peptide; BUN, blood urea nitrogen; CK, creatine kinase; CK-MB, creatine kinase-MB; Cr, creatinine; D-Di, D-Dimer; Hb, haemoglobin; hs-CTNI, High-sensitivity cardiac troponin I; LDH, lactate dehydrogenase; PLT, platelet; MYO, serum myoglobin; NEU% neutrophil ratio; Lac, lactic acid.

2 Nonstandard abbreviations like Cr for creatinine is discouraged.

**Response:** Thank you for your careful review. We have removed this abbreviation.

3 was it a suicidal or accidental poisoning?

**Response:** Thank you for your careful review. We apologize for not more details of the case in the original manuscript. The patient drank 200 ml of 56° white wine at home at approximately 1:00 PM on 22 April, 2021. At approximately 16:00, his family found him unresponsive with blackened lips, blood stains in the corners of the mouth, and blood stains on the ground beside him, along with a bottle of 'pipeline dredging agent'. He was sent to the emergency department of a local hospital 1 h later. He was administered naloxone and lansoprazole as symptomatic supportive treatment to reverse alcohol overdose and protect his stomach, respectively. Later, the patient gradually gained consciousness and said that he had ingested the 'pipeline dredging agent' orally. Given the sequence of events, we speculate that it was suicidal poisoning.

4 Was GI endoscopy done?

**Response:** Thank you for your careful review. GI endoscopy was not performed. We suggested the patient to undergo GI endoscopy; however, the patient and his family refused.

5 with your experience with this case, what additional thing/s would to you like to suggest for better outcome of such patients?

**Response:** Based on the analysis and summary of the patient's clinical data, we believe that the early vital signs were stable and airway assessment appeared safe, even after oral ingestion of a non-volatile corrosive substance. The airway should actively be protected, and the patient's vital signs and airway changes should be closely monitored. In addition, the patient's underlying diseases should be seriously taken into consideration.

6 Please adhere to journal guideline to mention more than 5 authors in the references (ref 8)

**Response:** Thank you for your careful review. We have gone through the journal's formatting requirements that state: 'Citing more than five references in a single citation, even when separated by a hyphen, should be avoided; for example [1-6], [2-14], and [1,3,4-10,22] are all considered inappropriate reference citations'. For the reference list, all author names have been mentioned per the following guideline: 'English-language journal articles (list all authors and include the PMID and DOI, where applicable)'. We have made sure that these are adhered to.

**Reviewer #2:**

**Thank you for your comments and suggestion. We appreciate your efforts in reviewing our manuscript. We wish good health to you, your family, and community. Your careful review has helped us in making our study clearer and more comprehensive.**

1 Authors showed a case of pipeline dredging agent poisoning. The detail presentation might be helpful for clinicians to manage similar case. The diagnosis of acute alcohol poisoning was unclear. At the CT on day 7, gas production was found around esophagus. Necrosis of esophageal wall and infection of gas-producing bacteria might be found.

**Response:** Thank you for your careful review. The patient drank 200 ml of 56° liquor at home at approximately 1:00 PM on 22 April, 2021. He was diagnosed with 'acute alcohol poisoning'. The diagnosis come from the patient's history. Your careful review has helped to make our study clearer and more comprehensive.

2 At Figure 5, the image was unclear.

**Response:** Thank you for your careful review. We apologize for not providing a clearer image for Figure 5. We do not have a higher-resolution image than the one we have submitted. If deemed necessary, we can delete it. We are extremely grateful to you for pointing out this problem.

**Editor:**

**Thank you for allowing us to resubmit a revised copy of the manuscript. We highly appreciate your time and consideration. We hope that the revised manuscript is now acceptable for publication in the *World Journal of Clinical Cases*. Thank you once again for your time and efforts.**

Sincerely,

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