

Responds to Review Comments

Dear Editors and Reviewers:

Thank you for your letter and for the review comments concerning our manuscript entitled “ Hyperthyroidism and severe bradycardia: case series and literature review ” (BPG-80922). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval.

Reviewer #1:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This is an interesting report of 3 cases of the rare association of thyrotoxicosis with bradyarrhythmia, together with a well conducted literature review of similar reported cases. It should be accepted. To make the article better, 3 minor corrections can be made:

1. The format needs improving, especially for the Table and Figures. Presently the headings in the Table do not fit into the same line of the allocated column, and legends for the Figures appear on different pages.

Answer: We modified the table and adjusted the picture.

2. In the Introduction, authors write: “Therefore, patients with hyperthyroidism often develop tachycardia (such as sinus tachycardia and rapid atrial fibrillation). However, severe bradycardia, such as sick sinus syndrome (SSS) and atrioventricular (AV) block, are seldom encountered in patients with hyperthyroidism, and pose a difficult clinical problem for physicians’ To make the 2 sentences flow more logically, ‘are seldom’ should be replaced with ‘can occasionally be’

Answer: We took your advice and ‘are seldom’ had been replaced with ‘can occasionally be’.

3. In Case 3, last paragraph, authors write “However, the patient exhibited obvious alternation between rapid atrial fibrillation and sinus arrest within a day, and echocardiography showed changes in cardiac structure. This indicated a high risk of

cardiac arrest during the treatment process”. Cardiac arrest refers to ventricular fibrillation or asystole. Instead of cardiac arrest, do the authors mean sinus arrest or bradyarrhythmia instead? If they really mean cardiac arrest, then they should provide references for their statement that treatment of thyrotoxicosis with SSS can cause ventricular fibrillation or asystole.

Answer: We adjusted the description of the text and adjusted this paragraph to the discussion section

Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: Dear, I bring below my humble notes and I hope that they can help mainly the authors in this review and publication process. **THEME OF THE STUDY:** The topic discussed presents an important observation to establish a possible cause and effect relationship.

1. **ABSTRACT:** I FIND CONFUSED BY THE WRITING OF THE STUDY.

Answer: We have revised the Abstract according to the comments and arranged it according to the layout mode of the magazine.

2. **INTRODUCTION:** It is very important to define hyperthyroidism and its prevalence, especially in the local population, if possible. The wording is also confusing as in the following excerpt: These effects of hyperthyroidism often lead to tachycardia. Therefore, patients with hyperthyroidism often develop tachycardia (such as sinus tachycardia and rapid atrial fibrillation). I also missed information on the search strategy, which would be a plus. References of review articles, systematic reviews and meta-analyses should also be explored for a comprehensive review.

Answer: According to these suggestions, we made modifications and contacted professional companies to polish the text

3. **DESCRIPTION OF THE CASES:** I consider it confusing and not following the standard for type publications, such as: the sequence must be chronological, organized

and with enough details for the reader to establish his interpretation. As these are several cases, they must be sequentially reported. The report must present demographic data (age, weight, sex, color, occupation), clinical history, physical examination and altered complementary exams. This information was not presented and the paragraphs are not associated. It is essential to establish a temporal and causal relationship with the reported situation. The description of the cases must effectively be restricted to the cases studied by the authors and the cases listed in the literature must be included in the discussion as a means of comparison.

Answer: We have revised the Case Presentation according to the comments and arranged it according to the standard for type publications

4. DISCUSSION: as stated above, the cases extracted from the literature must be presented at this time and the discussion must emphasize the priority and uniqueness of the report. It is extremely important to establish the validity of the findings in comparison with data in the literature. Literature data should be succinctly described, comparing and evaluating contrasts and nuances with the reported case, which was not done.

Answer: We have revised the DISCUSSION according to the comments. The cases extracted from the literature have been adjusted to the discussion. But the differences between our cases are not detailed, because the purpose of our article is to find some rules from these 34 cases and guide future treatment.

5. CONCLUSION: although it was understood, it can be improved only after the correct writing of the study.

Answer: We have contacted professional companies to polish the text to make it more accurate.

Round 2

Specific Comments To Authors: Dear authors! The article became much more consistent, but the division of reported cases into topics did not help. The cases could be described in their entirety in sequence. Some topics the text is long and others short, this is bad. Therefore cases must be described continuously.

Answer: We list the topic of cases 3 according to the requirement of WJCC.