



February 3rd, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 8131-review.doc).

Title: Immune thrombocytopenic purpura induced by intestinal tuberculosis in a liver transplant recipient

Author: Renata dos Santos Lugao, Marina Pamponet Motta, Matheus Freitas Cardoso de Azevedo, Roque Gabriel Rezende de Lima, Flávia de Azevedo Abrantes, Edson Abdala, Flair José Carrilho, Daniel Ferraz de Campos Mazo.

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 8131

We are grateful to the reviewers for the helpful comments on the original version of our manuscript. We have taken all these comments into account and submit, herewith, a revised version of our paper. The revised manuscript was sent to copyediting service provided by professional English language editing company (American Journal Experts), as recommended by World Journal of Gastroenterology. Please, find below our answers to all the queries. All changes are highlighted in yellow. We hope that the revised version of our paper is now suitable for publication in World Journal of Gastroenterology and we look forward to hearing from you at your earliest convenience.

Sincerely yours,

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1- Reviewer 01560498

Comments to Authors:

Lugao RS, et al reported a case of ITP associated with intestinal tuberculosis in a liver transplant recipient. The mechanism of ITP associated with tuberculosis is not well elucidated, and clinical responses after initial therapy should be considered in cases of ITP unresponsive to steroids and intravenous immunoglobulin, especially in immunocompromised patients including organ transplant recipients. It is difficult to make a diagnosis of ITP related tuberculosis, and a timely therapy is important even in a suspicious case. Please state the interest points of your case, and an importance of a timely therapy for ITP associated with tuberculosis. The CORE TIP section as described in Author Guideline is required, and I guess that these points should be mentioned in CORE TIP section.

Response:

We stated the interesting points of the case in the CORE TIP section as recommended.

2- Reviewer 02530754

Comments to Authors:

The manuscript by Lugao et al is well written and informative. However there are some caveats that should be discussed by the authors:

1- There are over 100 entries in pubmed linking tuberculosis and thrombocytopenic purpura, and at least 1 of them with intestinal tuberculosis (Olave MT, Sangre (Barc) 1999). Therefore the authors should remove/modify their statement in the introduction ("Here, we report the first case of ITP associated with intestinal tuberculosis) and also in the discussion ("to our knowledge, there are no reports of ITP associated with intestinal tuberculosis").

Response:

We included the cited reference and modified our statement in the introduction and discussion section.

2- Do the authors have an explanation for the clinical onset with pancytopenia? Did hemoglobin values and leukocyte count improve with steroids or anti-tuberculosis therapy?

Response:

The hemoglobin values and leucocytes count improved with anti-tuberculosis therapy. Pancytopenia is also described with tuberculosis, and this improvement obtained with tuberculosis treatment suggests a causal relationship with tuberculosis itself. This information was included in the case report section (with hemoglobin and leukocytes values) and in the discussion section.

3- The authors should further describe and discuss the initial immunosuppressive regimen (trough concentrations of tacrolimus), and its modification after the diagnosis of tuberculosis.

Response:

The initial immunosuppressive regimen and its modification after the diagnosis of tuberculosis were provided.

3- Reviewer 02860861

Comments to Authors:

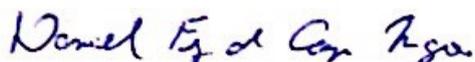
This is a well described and interesting case report. However there are some grammatical errors, i.e. "IPT" instead of "ITP" in paragraph "Case Report" and "Discussion". Furthermore it is unclear whether the immunosuppression with tacrolimus was finished at the time of ITP-diagnosis. Maybe tacrolimus could be also the trigger for the development of ITP. This should be recorded in the discussion.

Response:

The mentioned grammatical errors were corrected. The revised manuscript was sent to copyediting service provided by professional English language editing company (American Journal Experts), as recommended by World Journal of Gastroenterology. The immunosuppressive regimen information before, at the time and after the ITP-diagnosis was provided to improve clarity. Tacrolimus role in thrombocytopenia was also recorded in the discussion section.

Thank you again for considering our manuscript for publication in the *World Journal of Gastroenterology*.

Sincerely yours,



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