

Manuscript Review

Number ID 02446201:

First of all, thank you for all of your good advices.

- 1) I wrote “using GnRH agonist alone” here because HCG is not a hyperstimulation drug. GnRHa and Gn are standard injections in long protocol. Then I corrected the title to be more accurate.
- 2) I modified my title by adding “case report”, and also restructured the abstract.
- 3) I added key words “infertility, FET and HCG”.
- 4) I adjusted the details of the background.
- 5) Method and Result:
 1. The protocol used has been presented as a timeline table to make the methodology clear.
 2. The hormonal assay done has been presented as tables.
 3. In case 1, the levels of FSH and LH are added after treatment. The twins were carried at 38 weeks of gestational age.
 4. In case 2, the hysterosalpingography showed unobstructed fallopian tubes.

The time of embryo transfer is two months after oocyte retrieval.

Duration of treatment with GnRH. The patient was given 0.1 mg of triptorelin acetate daily from the mid-luteal phase (day 20 of her menstrual cycle) for fourteen days.

Discussion. The discussion is restructured to maintain continuity of paper. The strengths and limitations of the reported cases need to be discussed with proper references. Add relevant references of reports showing live births following GnRHa treatment.

I renewed some references. But the special cases are rare in recent years. In particular, there are fewer cases of live births.

References. More latest references are included.

Quality of manuscript organization and presentation. I include more information that clarifies and justifies my choice of methods.

Number ID 06479460:

First of all, thank you for all of your good advices.

1 Title. Does the title reflect the main subject/hypothesis of the manuscript? Yes

2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? Yes

3 Key Words. Do the key words reflect the focus of the manuscript? Yes

4 Background. Does the manuscript adequately describe the background, present status and significance of the study? Yes

5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? Fair

I add some details in manuscript.

6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field?

Fair

These two special cases provide valuable knowledge through our experience. They indicated that oocyte retrieval can be an alternative to cycle cancellation in the conditions.

7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? Fair

The discussion is restructured to maintain continuity of paper.

8 Illustrations and tables. Are the figures, diagrams, and tables sufficient, good quality and appropriately illustrative, with labeling of figures using arrows, asterisks, etc, and are the legends adequate and accurately reflective of the images/illustrations shown? It will more meaningful if the author would summarize the cases with their hormonal profiles in one table.

The protocol timelines and hormonal datas are listed in different tables(table1-4).

9 Biostatistics. Does the manuscript meet the requirements of biostatistics? N/A

10 Units. Does the manuscript meet the requirements of use of SI units? N/A

11 References. Does the manuscript appropriately cite the latest, important and authoritative references in the Introduction and Discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? Most of the references all more than 20 years old and I suggest to get an references that are more recent.

I renew some references. But the special cases are rare in recent years.

12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? I feel the language use by author need improving. Suggest for a proofread and editing to improve the language.

I have tried my best to ask a professional editor for help.

13 Research methods and reporting. Authors should have prepared their manuscripts according to BPG's standards for manuscript type and the appropriate

topically-relevant category, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. For (6) Letters to the Editor, the author(s) should have prepared the manuscript according to the appropriate research methods and reporting. Letters to the Editor will be critically evaluated and only letters with new important original or complementary information should be considered for publication. A Letter to the Editor that only recapitulates information published in the article(s) and states that more studies are needed is not acceptable? Yes

14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? Yes

Number ID 05238069:

First of all, thank you for all of your good advices.

The authors described two cases experienced ovarian hyperstimulation following the administration of GnRHa alone for pituitary down-regulation and FET. Both of pregnancy outcomes were good. This paper only illustrates two cases, but it has little significance for clinical guidance. Hence, it is recommended to provide more clinical advice on the management of such patients is recommended. However, some errors need to be corrected listed as the following.

Query 1: As is known, ovarian hyperstimulation following the usage of GnRHa without Gn is extremely rare. The authors suspected GnRHa stimulated new waves of follicular development one after another and the circulating Gn level might increase

and generate self-feedback. Please provide related Literatures to support the points.

Query 2: The title “Two live births from IVF-ET following the administration of gonadotrophin-releasing hormone agonist alone” had better be revised as “Three live births from IVF-ET following the administration of gonadotrophin-releasing hormone agonist alone”.

The corrected title “Two case reports of three live births from in vitro fertilization-embryo transfer following the administration of gonadotropin-releasing hormone agonist alone”

Query 3: In the line of “Mai Li¹, Ping Su², and Liming Zhou¹”, it had better delete “and”.

Mai Li, Ping Su, Liming Zhou

Query 4: In the line of Keywords—“Gonadotropin-releasing hormone agonist” “G” is recommended to be altered “g”.

gonadotropin-releasing hormone agonist

Query 5: The conclusion of the second sentence might not be obtained from the discussion section above. It is suggested to add the discussion.

I add some details to the discussion.

Query 6: In addition, the authors should offer the related formal ethics documents that were reviewed and approved by their local ethical review committee.

I will offer the related formal ethics documents and upload it.