

March 31, 2014

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: 9246-review.doc).

Title: Intrathecal Morphine for Postoperative Analgesia: Current Trends

Authors: Kalindi DeSousa, Rajkumar Chandran

Name of Journal: *World Journal of Anesthesiology*

ESPS Manuscript NO: 9246

The manuscript has been improved according to the suggestions of reviewers: All changes are highlighted in yellow in the manuscript.

1 Format has been updated:

- More references have been added as per the requirement.
- All typographical errors have been corrected to the best of my knowledge.
- Font size is changed to 10 from 12 as required.
- Abstract now has 200 words while the core tip has 97 words.

2 Revision has been made according to the suggestions of the reviewer

(1) **The first reviewer** did not ask for any revision

(2) **The second reviewer:**

"1. Language editing to improve the vocabulary and paraphrasing. Correction of typographical errors is also required. Formatting has to be according to universal referencing and journal requirements."

The language is improved and typographical errors are corrected to the best of our knowledge. The formatting of references is according to the journal requirement.

"2. Document will be more comprehensive if you add Ramsay or other sedation scale for objective assessment of the side effect."

Some institutes use Ramsay sedation scale for the assessment of sedation and this has been added to the manuscript

"3. It would be helpful if you mention risk of infection as complication of the procedure and take appropriate preventive measures."

One new paragraph has been added for infection risk. Till today no case is reported for infection after single shot IT administration of morphine if precautions are taken as for any lumbar puncture. Reactivation of herpes simplex labialis (HSL) has been reported in parturients, which has been added to the script.

(3) **The third reviewer:**

- *"Please do not start a sentence with the word 'This' ":* Corrected throughout the manuscript.
- *"abbreviation 'IT', then intermixed the abbreviation and the full term throughout the paper":* Corrected throughout the manuscript
- *"Sometimes the headings are capitalized (Pharmacodynamics & Pharmacokinetics) and sometimes they are not (Different patient groups). Sometimes and is spelled out (Clinical Uses and Doses) and sometimes the*

ampersand is used (Pharmacodynamics & Pharmacokinetics" : Corrected

- *Change the word "cheap" to "inexpensive" or "cost-effective":* Changed to "cost-effective"
- *Core Tip: what is a Core Tip? Also, the second statement should not start with "It". What does "It" reference?:* "Core Tip" is one of the requirements of the journal. The second sentence is dropped since the core tip could not exceed 100 words.
- *Pharmacodynamics & Pharmacokinetics: needs references in first part of third paragraph.:* The reference was at the end of the section, now written twice.
- *Clinical Uses and Doses: in the Obstetrics section, you make the point for 24 hour monitoring, but why just in this section? :* 24 hour monitoring is for ALL patients and the point is stressed to tell the readers that it is important to remember to monitor the patient even when a small dose of 0.1 mg of IT morphine is used. The sentence is rephrased.
- *Clinical Uses and Doses: in the General Surgery and Urology section, why was the recommendation by the group with PROSPECT collaboration made not to use IT morphine or epidural analgesia?:* The sentence is rephrased with high risk: benefit ratio
- *Different Patient Groups: in the Elderly patients section you indicate that the elderly will be more sensitive to IT morphine, and then say no added risks have been reported and sedation scores are lower. This seems to be a contradiction:* Explanation for this is added in the manuscript.
- *Side Effects of IT Morphine: the third paragraph statement about a lack of clear definition for respiratory depression is critical and should be at the front of the discussion about respiratory depression. As it is now, the statement is sandwiched between the notion of early respiratory depression and ways to measure respiratory rate.:* New paragraph starts with definition of respiratory depression for better emphasis.
- *Summary: the statement about not using IT morphine for day surgery is important, but the reason for you saying that is lost in the first paragraph of Clinical Uses and Doses. Can you highlight that important observation within that paragraph?* It has been highlighted now.
- *You indicate that antiemetics should be prescribed for IT morphine, but I could not find anything about nausea and vomiting in the Side Effects of IT Morphine section, nor any place else in the document. If nausea and vomiting are in there, they are well-hidden.:* Apologies for this, it was only mentioned in the table earlier, now an entire new paragraph has been added.

3 References and typesetting were corrected. The reference numbers: 33, 55, 67 and 95 do not have PMID and the first pages of these references are attached. The reference no 39 is for a website and hence no PMID or DOI are written, also reference no 88 is for a chapter in a book which does not have PMID or DOI. We could not find DOI for the following reference numbers: 14,16,17,32,34,50,55,58,74,82,92 and 103.

Thank you again for publishing our manuscript in the *World Journal of Anesthesiology*.

Sincerely yours,



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