

Dear editor,

Thank you very much for your decision letter and advice on our manuscript (Manuscript # 85453) entitled “Non-arteritic anterior ischemic optic neuropathy combined with branch retinal vein obstruction: A case report”. We also thank the reviewers for the constructive and positive comments and suggestions. Accordingly, we have revised the manuscript. All amendments are highlighted in red in the revised manuscript. In addition, point-by-point responses to the comments are listed below this letter.

We hope that the revision is acceptable for the publication in your journal.

Look forward to hearing from you soon.

With best wishes,

Yours sincerely,

Hong-Xia Gong

First of all, we would like to express our sincere gratitude to the reviewers for their constructive and positive comments.

Replies to Reviewer 1

Scientific Quality: Grade D (Fair)

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

Conclusion: Major revision

Specific Comments to Authors: Dear Author,

1. The author needs to add the fundus image showing pale disc and poor foveolar reflex.

Thank you for your comments. The fundus of the patient showed typical NAION optic disc, so we didn't take fundus images, but made detailed records in the medical records, and focused on checking the visual field and FFA, which is very regrettable.

2. Why CT and MRI were not performed to look for any swelling in the optic nerve ?

Thank you for your opinion. Because the patient showed typical fan-shaped visual field defect connected with optic disc and low fluorescence above optic disc in early FFA, these are typical characteristics of NAION, and the patient did not have eye pain and eye rotation pain, and the drug treatment for improving circulation was effective, so we diagnosed NAION (combined with BRVO in this case), regardless of optic neuritis, so CT and MRI were not performed to find any swelling of optic nerve.

3. The authors must mention which Nerve - nourishing and circulation improving iv drugs were administered and in what doses for 2 weeks ? Dose were fixed or in tapering doses?

Thank you for your comments. We used ginkgo leaves extract injection (5ml: 17.5 mg, Yuekang Pharmaceutical Group Co., Ltd., GYZZ H20070226) 15ml, diluted

with 0.9% sodium chloride solution for 250ml, intravenous drip, the dosage is fixed.

4. The color and contrast findings pre and post treatment must be mentioned by the authors.

Thank you for your opinion. Has been added in the case record. "At the beginning of the patient's onset, the localized edema above the optic disc was light in color, and the lower boundary was clear and reddish. During the treatment, the edema of the upper optic disc was reduced and the color was light. Around January, the boundary of the optic disc was clear and the color of the upper optic disc was pale."

5. The case- report requires major revision and English-correction. Thanks

Thank you for your suggestion. I have modified.

Replies to Reviewer 2

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: I am really grateful to review this manuscript. In my opinion, this manuscript can be published in current form. This study reported a case of NAION with concealed BRVO, which was not improved by oral medication. One week later, the authors switched to intravenous administration of drugs to improve circulation, and the patient's visual acuity and visual field were recovered. No hormone therapy was used during the whole process. Based on the result of this report: FFA can help detect hidden BRVO in the diagnosis of NAION; Intravenous infusion of drugs for improving circulation has a positive effect on the treatment of such cases; NAION with concealed BRVO may not need systemic hormone therapy, which is different from the previous point of view of simple NAION treatment.

Thank you for your opinion.

Replies to Reviewer 3

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: The manuscript “Non-arteritic anterior ischemic optic neuropathy combined with retinal branch vein obstruction” deals with the relevant and very frequent subject of arterial disease in the elderly, the case is clear and well illustrated. I think that, if necessary, the text could be shortened; also, the line 160 on page 13, “and... case.” does not seem relevant.

Thank you for your opinion. I have modified.