

Answering Reviewers

Reviewer's code: 00646357

Reviewer's country: Egypt

SPECIFIC COMMENTS TO AUTHORS

-Add more on the basic of this disease in the introduction -Discuss role of imaging using these ref Khalek Abdel Razek AA, El-Serougy L, Abdelsalam M, Gaballa G, Talaat M. Differentiation of primary central nervous system lymphoma from glioblastoma: Quantitative analysis using arterial-spin labeling and diffusion tensor imaging. World Neurosurg 2019;123:e303-e309. Razek AAKA, El-Serougy L, Abdelsalam M, Gaballa G, Talaat M. Differentiation of residual/recurrent gliomas from postradiation necrosis with arterial spin labeling and diffusion tensor magnetic resonance imaging-derived metrics. Neuroradiology 2018;60:169-177. -English language correction through the manuscript -Update of references as most of references

Answering

1. We added more on the basic of this disease in the introduction.
2. References were updated. We added two references: Khalek Abdel Razek AA, El-Serougy L, Abdelsalam M, Gaballa G, Talaat M. Differentiation of primary central nervous system lymphoma from glioblastoma: Quantitative analysis using arterial-spin labeling and diffusion tensor imaging. World Neurosurg 2019;123:e303-e309. Razek AAKA, El-Serougy L, Abdelsalam M, Gaballa G, Talaat M. Differentiation of residual/recurrent gliomas from postradiation necrosis with arterial spin labeling and diffusion tensor magnetic resonance imaging-derived metrics. Neuroradiology 2018;60:169-177.
3. The English has been edited by medical English professionals.

Reviewer's code: 00227683

Reviewer's country: China

SPECIFIC COMMENTS TO AUTHORS

The authors reported a case of entrapment of temporal horn secondary to postoperative gamma-knife radiosurgery (GKS) in intraventricular meningioma. I have comments in detail as follows: 1. The image in Fig 1.c already showed hydrocephalus and residual piece of tumor before GKS.

Except for neuroimaging findings before and after the first operation, before and after GKS, and before and after the second operation, the authors should supplement the pathological results of the two operations as well to testify the case secondary to tumor edema and increase due to postoperative GKS rather than a coincidence of disease progress after GKS following surgical resection.

2. The course of GKS therapy or the total amount of radiation exposure was unclear. Please clarify it. 3. It is suggested that the time axis should be used to better present the course of treatment.

Answering

1. We supplemented the pathological results of the two operations.
2. We clarify the course of GKS therapy.
3. We added the time axis, which could better present the course of treatment.

Reviewer's code: 02445870

Reviewer's country: Mexico

SPECIFIC COMMENTS TO AUTHORS

This manuscript is interesting and shows a complication of radiosurgery which should be considered in similar situations; however, various points must be addressed: 1. In the title the line "a case report and review of the literature" is redundant and this report is not a comprehensive review of the literature, I think it could be deleted. 2. The word "impeded" on P4,p1,L2 is odd, a more descriptive word could be used (obstruction, blockage, etc.?) 3. English editing is necessary.

Answering

1. We deleted "and review of the literature" in the title.
2. The word "impeded" on P4,p1,L2 was replaced with "obstruction".
3. The English has been edited by medical English professionals.