

March 14, 2022.

Dear editor,

Please find attached files of revised manuscript in word format

Manuscript Title:

Effects of propofol combined with lidocaine on hemodynamics, serum ACTH, IL-6, and Cor in children

Name of Journal:

World Journal of Clinical Cases

Author:

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Manuscript ID:

74404

First of all, thank you for your careful guidance of this article. Revision has been made according to the suggestions of the reviewer:

Review Date: 2022-02-06 10:52

Specific Comments To Authors: In the manuscript “ Effects of propofol combined with lidocaine on hemodynamics, serum ACTH, IL-6, and Cor in children” , the authors tried to investigate the clinical value of propofol combined with lidocaine-assisted anesthesia in pediatric surgery. They performed a retrospective study of children patients who underwent abdominal surgery received ketamine or ketamine, propofol, and lidocaine for anesthesia. They conclude that the anesthetic effect of propofol combined with lidocaine-assisted ketamine for pediatric anesthesia was better than that of ketamine alone, with less influence on hemodynamics and pediatric stress response indices, lower incidence of restlessness during the recovery period, and lower incidence of adverse reactions. The topic of this work is interesting. The methods of data analysis are very clear, and the results are presented well. I suggest the authors give more details on the relationship between propofol and lidocaine in both their retrospective study and literature review.

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Answer: We have added it to the discussion more details on the relationship between propofol and lidocaine

Review Date: 2022-02-06 10:51

Specific Comments To Authors: The authors of this study aimed to explore the clinical value of propofol combined with lidocaine-assisted anesthesia in pediatric surgery. To do this, they

analyzed the pre- and postoperative HR, MAP, SpO₂, serum ACTH, IL-6, and Cor levels, restlessness score during the recovery period (PAED) and AEs of 120 children who underwent abdominal surgery. I have no objections as far as methods are concern. This topic is actual and well described. The manuscript is well written and very interesting, and authors presented also the limitations of the study. They concluded that the anesthetic effect of propofol combined with lidocaine and ketamine in pediatric surgery was better than that of ketamine alone. The article provides an essential reference for researchers in this field and provides a basis for developing a more reliable anesthesia scheme for clinical pediatric abdominal surgery. I recommend that the manuscript can be published.

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Answer: Thank you very much for your comments. The manuscript has been edited carefully according to the journal's guideline.