

ROUNA 1

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**Scientific Quality:** Grade C (Good)

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

**Conclusion:** Major revision

Dear Authors, Thank you for conducting a very interesting case report entitled "Resolution of herpes zoster-induced small bowel pseudo-obstruction by epidural nerve block: case report" for possible publication in the esteemed journal "World Journal of Clinical Cases". The manuscript needs major revision because of the following comments: 1. Major editing and language corrections are necessary. 2. There is no core tip in the main file. 3. Title a. The title missed the letter "A", therefore, correct it as "Resolution of herpes zoster-induced small bowel pseudo-obstruction by epidural nerve block: A case report". b. There is no running title. 4. Abstract a. It is not fractioned into the background, case summary, and conclusion as per journal style. b. "weakened resistance" is a weak term. c. The sentence "Before herpetic manifestations appeared, the patient we treated was misdiagnosed as cholelithiasis with cholecystitis, because right upper abdominal pain ." is confusing to the readers. Please clarify it. Besides, you should start the description of the

case with the age and gender of the patient and the chief complaint. d. "Conventional management of zoster-induced intestinal pseudo-obstruction largely includes antiviral therapy, gastrointestinal decompression, and enemas, whereas intestinal perforation calls for surgery. In this particular instance, epidural blockade effectively remedied a small bowel pseudo-obstruction due to herpes zoster. Similarly affected patients should perhaps be managed accordingly to facilitate treatment and avoid dire consequences (ie, intestinal necrosis and perforation) leading to surgery." It is a long conclusion with unnecessary information.

5. Each keyword should be started with a capital letter and separated from the other by a semicolon. 6. Introduction a. There is huge information without references. b. It needs to describe the challenging part i.e. why your case is important to be considered as a case report?, are there similar cases reported in the literature?, and what is the difference/s between your case and other similar reported cases?. 7. Case presentation a. You didn't follow the journal style of writing this section. b. This title (Case report) should be changed to "CASE PRESENTATION". c. The sequence of Figures should be changed; Figures 3 and 4 before Figures 1 and 2. Besides, it is better to unite Figures 3 and 4 into one Figure with two panels (A and B) and also Figures 5 and 6 into one Figure with two panels (A and B). d. The resolution of Figures 1 and 2 are not good and are of small sizes. e. It is better to use an arrow to delineate the

obstruction in Figure 2. f. Mention the side of the lesion in Figures 3, 4, 5, and 6. g. Please, start the word "Day" with a small letter. h. It is better to rewrite this sentence "(blood pressure [BP], 156/85 mmHg; heart rate [HR], 65 beats/min; oxygen saturation [SpO<sub>2</sub>], 96-97%)." As such "[blood pressure (BP), 156/85 mmHg; heart rate (HR), 65 beats/min; oxygen saturation (SpO<sub>2</sub>), 96-97%]". i. "However, but" I think one of them is enough to be used. 8. Discussion a. acyclovir (as antiviral therapy). It is well known that acyclovir is an antiviral, therefore, it is not necessary to mention it here. b. "The although" it is better to say "Although the". c. "This case demonstrates that in addition to pseudo-obstruction of the colon, herpes zoster may well induce pseudo-obstruction of small bowel. Epidural blockade addresses both the intercostal neuralgia and the obstructive gut manifestations that zoster inflicts and should be considered in similarly affected patients going forward. It may shorten the course of treatment and prevent dire obstructive consequences (ie, intestinal necrosis and perforation) requiring surgical intervention." This should be under the title of the "CONCLUSION" 9. References: they are NOT according to the journal style because: a. You didn't bold the first author in each reference. b. You didn't mention all authors. c. The last two references should be supported by their URL.

**Resolve issues of peer review report:**

1. the paper has been revised and has been sent for polishing
2. core tip has been added
3. "a" has been added to the title
4. the abstract has been modified according to the template of the journal, and the word "weakened resistance" has been removed. The patient had ultrasound examination before admission, and had biliary calculi and cholecystitis, and CT examination after admission had gallstones; The conclusion has been modified to remove unnecessary contents.
5. the first letter of the keyword has been capitalized and separated by semicolons
6. the introduction has added references and added the importance of the case. Because this case is a false small bowel obstruction, there is no previous report on the use of epidural block, so it is different from other cases.
7. it has been modified by referring to WJCC version, rewriting the case introduction into case statement, merging and adjusting the sequence of the diagram. Since no obstacles are found in CT, no obstacles are depicted. The right lesion has been indicated in the figure, the case of "day" has been changed, and the blood pressure and heart rate have been partially rewritten. However, but has removed one.
8. the discussion on acyclovir has been deleted and only the name has

been mentioned. The last part of the discussion has been changed under the conclusion.

9. the references of this paper have been modified according to the WJCC reference template

10.The last REFERENCES have been removed

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**Scientific Quality:** Grade A (Excellent)

**Language Quality:** Grade B (Minor language polishing)

**Conclusion:** Accept (General priority)

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What was the actual CT report by radiologist? Was it small bowel obstruction alone or signs of colonic obstruction was present too? It would be not making sense if T5-T10 zoster lesion could affect the large bowel too since it is nowhere contributing to the inferior mesenteric ganglion. If there was confirmed small bowel obstruction alone, then the texts regarding Ogilvie syndrome should be reduced. It's just too much. Likewise, the role of acupuncture needs stronger citation articles. The patient didn't even get acupuncture and I won't bring it up at all. Many minor changes recommended. See the comments and corrections in the

word file. Otherwise, very well written. Will be looking forward to the publication.

**Resolve issues of peer review report::**

1. the CT report of the radiologist is: low intestinal obstruction, no definite obstruction point is found.
2. herpes zoster of t5-t10 only affected the small intestine dominated by T9-T10. CT results showed that only the small intestine was obstructed.
3. the revised paper has reduced the content of Ogilvy syndrome
4. because the patient was not treated with acupuncture, the acupuncture part has been removed after modification.

[20220530 To the Authors.docx](#)

**Scientific Quality:** Grade D (Fair)

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

**Conclusion:** Major revision

Dear Authors, This case report needs major revision and some important suggestions are as follows: My suggestion for running title is “ Effects of

epidural blockade in Herpes zoster". Signed agreement from the patient must be indicated. A structured abstract is in accordance with journal propositions. At first, grammar corrections and proofreading from native English speaker are necessary. In the introduction section the main objective of this case report is not clearly stated. There are needs to emphasize what is contradictory from the literature including animal studies about effects of epidural analgesia on herpes zoster-induced small bowel pseudo-obstruction. It is necessary to give information that administration of corticosteroids into the epidural space may encourage adverse effects such as reactivation of latent virus in the dorsal root ganglion. We know that epidural corticosteroid may precipitate herpes zoster while attenuating postherpetic neuralgia. What are possible complications of the conventional management of zoster-induced intestinal pseudo-obstruction such as enemas? Maybe intestinal perforation may occur during injection of fluids and epidural blockade may be justified as a better choice in the treatment? These doubts must be more discussed in this manuscript. Are there similar clinical cases showing the effects of pain treatment by epidural analgesia on other complications such as bowel pseudo-obstruction in HZ patients ? Please, emphasize in the introduction section what is the importance of this case report ? What is specific for this case in comparison to the other similar articles? Methods section needs to be rewritten, started with clinical

symptoms, followed by X ray or CT exams and blood analysis. Figures 3 and 4 is better to show as Figures 1 with two photos and Figures 1 and 2 together as Figure 2 with two photos and Figure 5 and 6 as Figure 3 with tags on the photos to show most important details. A possible mechanism of an epidural analgesia in resolving abdominal problem such as bowel pseudo-obstruction is not explained at all. The importance of this case report is not explained through the comparison with other published cases or similar research. References must be in accordance with the journal style. The last two references are not novel. This is not historical review and references 18, 19 are better to avoid.

**Resolve issues of peer review report::**

1. the running title has been modified as "effect of epidural block on herpes zoster"
2. the patient has signed the informed consent for treatment
3. the abstract has been modified according to the format requirements of WJCC
4. this thesis has been sent to native English speaking countries for polishing
5. the main purpose of this case report: to clarify that epidural block can treat small bowel pseudo-obstruction caused by herpes zoster.
6. in this paper, the 15th reference is added to discuss the possible

recovery of herpes zoster caused by the dose and application time of related hormones.

7. there are reports of pain caused by Hz and the treatment of pseudocolon obstruction by epidural block; There were no reports of small bowel pseudo-obstruction.

8. there are clinical cases showing the therapeutic effect of epidural analgesia on colonic Pseudo-obstruction, but they are not HZ patients.

9. compared with other treatment methods, there is no literature report on the treatment of intestinal obstruction caused by herpes zoster by epidural block. Which is the better choice needs to be proved by animal grouping experiments.

10. the importance of this case is mainly the small bowel pseudo-obstruction, and epidural treatment is effective.

11. the introduction has been revised according to the requirements of WJCC magazine.

12. the patient has supplemented the X, CT and other contents with words and pictures.

13. the picture sequence has been adjusted as required

14. The possible mechanism of epidural analgesia for small bowel Pseudo-obstruction has been explained.

15. this case report has been explained by comparison with other published cases or similar studies in terms of treatment.

16. references have been modified in WJCC format.

17. references 18, 19 have been deleted.

## ROUNA 2

Dear Authors, Thank you for revising your case report study entitled "Resolution of herpes zoster-induced small bowel pseudo-obstruction by epidural nerve block: A case report" for possible publication in the esteemed journal "World Journal of Clinical Cases". I appreciate your great work in revising the article. However, the manuscript still needs minor revision according to my comments in the main manuscript file

Resolve issues of peer review report:

*We have revised the original text one by one according to the comments of the reviewers*