

Dear Editor, Dear reviewers,

Thank you for your letter dated June 17. We were pleased to know that our work was rated as potentially acceptable for publication in Journal, subject to adequate revision. We thank the reviewers for the time and effort that they have put into reviewing the previous version of the manuscript. Their suggestions have enabled us to improve our work. Based on the instructions provided in your letter, we uploaded the file of the revised manuscript.

We would like also to thank you for allowing us to resubmit a revised copy of the manuscript. We hope that the revised manuscript is accepted for publication in the World Journal of Clinical Cases.

Sincerely,
You-Lin Shao

Below is our point-by-point response to the comments raised by the reviewers. The comments are reproduced and our responses are given directly afterward in a different color.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Very interesting case and review for this rare complications of the PM causing concurrent neutropenia and DILI 1. please describe the possible mechanism of this herbal-induced neutropenia of PM. 2. please describe why your team did not perform liver biopsy rather than bone marrow aspiration, your thinking process and any differential diagnosis from bone marrow biopsy?

We thank the reviewer for the very interesting comment.

1. please describe the possible mechanism of this herbal-induced neutropenia of PM.

Thank you for the suggestion. We have added the information required as explained above (On lines 10-14 of the last paragraph of DISCUSSION).

2. please describe why your team did not perform liver biopsy rather than bone marrow aspiration, your thinking process and any differential diagnosis from bone marrow biopsy?

We thank the reviewer for the very interesting question.

Hepatotoxicity of PM is a relatively common drug-induced liver injury. After excluding other common causes of liver injury, we had sufficient basis and confidence for its diagnosis and prognosis, so we did not perform liver histological examination.

On the other hand, benign and malignant blood system diseases are one of the main causes of granulocytopenia. As soon as severe granulocytopenia was found in the patient, we immediately investigated benign and malignant blood system diseases through bone marrow histology examination to avoid missing blood system diseases that need urgent treatment.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: This is an interesting case of Polygonum multiflorum induced HILI. Also known as He-Shou-Wu or Fo-ti, it is the most common cause of HILI in China. It is mainly used as a hair supplement and to improve insomnia and coordination. The most common lesion is hepatocellular followed by cholestatic. The mechanism of injury is probably immunologically mediated. Patients received adenosylmethionine, glutathione, glycyrrhizin, and polyene phosphatidylcholine. Their efficacy or improvement in outcomes is uncertain, tough. I would suggest the authors reading systematic review on the subject (<https://www.wjgnet.com/2307-8960/full/v9/i20/5490.htm>). Although it is an interesting case, it needs major improvement in the manuscript. Introduction is not very well written; the case could be better presented and summarized; I would suggest defining which infective liver pathologies you have excluded; discussion is better, but it lacks comparison to other cases, and discussion on the efficacy of the treatment used.

We thank the reviewer for the very interesting comment.

1. I would suggest the authors reading systematic review on the subject(<https://www.wjgnet.com/2307-8960/full/v9/i20/5490.htm>).

Thank you for your recommendation, we have read the literature: Herb-induced liver injury: Systematic Review and meta-analysis. This article is the best evidence of "PM is the Most Common Cause of Herbal Medicine-related DILI", which has been cited (Reference 2).

2. Introduction is not very well written.

Thank you for the suggestion. Revision of Introduction: Delete the original first sentence. Use PM-related information instead to make it more coherent (On lines 1-3 of INTRODUCTION).

3. The case could be better presented and summarized; I would suggest defining which infective liver pathologies you have excluded.

Thank you for underlining this deficiency. In the Laboratory Examinations section, we made more detailed statements (On lines 3-7 of Laboratory examinations).

4. Discussion is better, but it lacks comparison to other cases, and discussion on the efficacy of the treatment used.

Thank you for the suggestion. We have added the information required as explained above (On lines 14-26 of the last paragraph of DISCUSSION).

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Thank you for your submission. Your manuscript is readable and very interesting. The manuscript is well organized and follows a clear flow.

We thank the reviewer for the very interesting comment.