## Point-by-point responses to the reviewers' comments

# **Reviewer 1:**

## #1.

Scientific Quality: Grade A (Excellent)Language Quality: Grade B (Minor language polishing)Conclusion: Accept (General priority)Specific Comments to Authors: This is an educational and unique case

## Response

Thank you for your thoughtful review and comments.

# **Reviewer 2:**

Scientific Quality: Grade C (Good) Language Quality: Grade B (Minor language polishing) Conclusion: Major revision

# #1.

"In the summary section, the main complaint was not consistent with the main portion of the article."

## Response

Thank you for your valuable suggestion. We have added a sentence to the Case Summary section (page 3, line 13):

## From

"A 50-year-old woman who experienced cough at night and exertional dyspnea for more than 6 months, bilateral lower extremity edema for 2 months, and worsening fatigue was diagnosed with cellulitis on the left arm due to left elbow tenderness." "A 50-year-old woman who experienced cough at night and exertional dyspnea for more than 6 months, bilateral lower extremity edema for 2 months, and worsening fatigue visited our hospital for tenderness in the left arm over several recent days. She was diagnosed with cellulitis on the left arm due to left elbow tenderness."

## #2.

"I was wondering why you did not provide any amylase data for this patient with pancreatitis."

#### Response

We have added a sentence to the Laboratory Examinations section to include the value of amylase (page 6, line 19 and page 7, lines 18–19):

In the Laboratory Examinations section:

From

"The following results were observed: "

То

"The following results were observed at the initial examination:"

and

In the Final Diagnosis section:

From

"Brachiocephalic to left brachial vein thrombotic vasculitis with pancreatic pseudocysts

in adjacent tissues of the pancreas and mediastinum"

#### То

"During the next CT scan, the amylase value was 1108 U/L; therefore, a final diagnosis was made of brachiocephalic to left brachial vein thrombotic vasculitis with pancreatic pseudocysts in adjacent tissues of the pancreas and mediastinum.

## #3.

"Arrows should be applied in the imaging to indicate the main finding on it."

## Response

Thank you for your valuable suggestion. We have added arrows to the figures.

# #4.

"The structure of the article is not proper, need to be modifiend. For example, the last sentence of diagnostic imaging should move to the treatment section."

## Response

Thank you for this suggestion. We have moved the sentence to the Treatment section (page 7, line 24 to page 8, line 18).

## #5.

"APTT shold be monitored if intravenous administration of heparin with 12000 U/day for 25 days, , but you did not mention in the article."

## Response

Thank you for your valuable suggestion. We have added a sentence in the treatment section (page 8, lines 4–5)

"The activated partial thromboplastin time was maintained at 38-42 seconds."

## **#6.**

"The discussion part was too simple, you should reveal the intrinsic relationship of pancreatitis and thrombotic vasculitis. In addition to, you should highlight what the readers can learned from your report."

#### Response

"

Thank you for pointing this out. The intrinsic factor cannot be determined; however, we have added a sentence to emphasize the relationship between pancreatitis and thrombotic vasculitis (page 9, lines 8–11). We have also added a paragraph consistent with your suggestion to the Discussion session (page 9, line 22 to page 10, line 2):

"Because the onset of pancreatitis in this patient is unknown, it is not clear whether systemic inflammation affected coagulopathy. Based on the presence of coagulopathy due to systemic inflammation, anatomical stenosis would be an additional cause of thrombotic vasculitis."

"In this case, the MPP was detected because the dermatologist who examined the patient considered the inflammatory change to be relatively worse than the severity of the left arm cellulitis. This is an instructive case demonstrating that it is important to perform a workup study in patients with suspicious or undetermined unexplainable data."