

Point-by-point response to reviewers' comments

Manuscript NO. 71513

Titled: **Laninamivir-induced ischemic enterocolitis: A case report**

EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) Science editor:

This case report is very well written.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before its final acceptance, the author(s) must provide the Signed Informed Consent Form(s) or Document(s) of treatment. For example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the

editor. Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Response: Thank you for your comments.

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: This manuscript by Suzuki et al. describe a very interesting enterocolitis due to introduction of laninamivir. This manuscript deserve revision before possible publication. General : Prefer passive than active sentences. Numbers below 12 have to be written in full letters. Case presentation : Indicate the epidemiologic season concerned by this clinical case. The introduction of INA was pretty late in the clinical history (>3 days post symptoms onset). Please justify. Laboratory examination have to be fully referenced (manufacturers name, location, country). Why have the authors performed HbA1C examination ? Have the authors performed PCR in stool? This examination is far better than culture, expecially for this diarrhea. Discussion The authors state that two factors could be considered for enterocolitis due to INAs, but did not explored them. Have they studied the deshydration state? And have allergic status regarding to INAs been described? Declaration : Why has the ethical approaval and consent been waived for this study ?

Response: Thank you for your valuable comments.

Accordingly, numbers below 12 have been stated in full.

Additionally, we added relevant details regarding the epidemiologic season.

We have revised details regarding the timeline from the onset of symptoms to hospitalization for easy comprehension, making it simpler to understand that the medication was taken within two days of onset.

We added fully referenced about laboratory examination (manufacturers name, location, and country).

The reason for examining HbA1C level has been added as follows: "She had no abnormalities, such as diabetes mellitus or liver dysfunction, which can manifest in ischemic episodes."

Polymerase chain reaction was not performed to detect stool in bacteria.

Similarly, dehydration has been mentioned as a physical finding.

We added relevant descriptions regarding the mechanism underlying oseltamivir-associated ischemic enterocolitis.

Additionally, we added relevant details about ethical approval and consent.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Case report was well written and it is interesting. It is more of diagnosis of exclusion and attributing it to Laninamivir. It is very important to rule out other causes of ischemic colitis. Please provide Vitals on admission to the first hospital to r/o any Hypotension which can cause ischemic colitis. Please mention LFTs as well which can be abnormal in ischemic episodes. Any specific stool cx ordered (for instance salmonella, C diff). Please mention any anti-platelets/ anticoagulation medication use. Strengths: Table, histology, imaging pictures and legends.

Response: Thank you for your valuable comments.

Accordingly, relevant details regarding blood pressure and pulse rate at the first hospital, liver function tests (LFTs), specific stool culture test for Salmonella and Clostridium difficile, and anti-platelets/anticoagulant use were added to the manuscript.