

Response to Reviewer's Comments

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors:

Dear authors,

It is with great satisfaction that I present my respectful considerations regarding the article in question. The study has the evident objective of introducing a new conservative approach to treating intense intrauterine bleeding in patients with fibroids. In this proposal, the focus lies not in endometrial ablation but rather in intervening in the vessels that nourish the fibroid.

This alternative proves promising, especially for patients who still desire to conceive and for those who have not succeeded with conventional conservative treatment. Considering an additional option before resorting to hysterectomy is justified, given the undesirable effects and associated costs.

It is crucial to substantiate the need for further studies to evaluate long-term outcomes. While the study is commendable, I note that certain aspects could be further explored in detail:

1. Despite stating that patients in cases 2 and 3 used LNG-IUS, the duration of use and whether this method provided any benefit, even temporarily, is not clear.

Reply:

Thank you for reviewing our paper. As you pointed out, we have added the duration of use of LNG-IUS in cases 2 and 3. Also, as stated in the manuscript, this treatment was ineffective and the symptoms of heavy menstrual bleeding worsened, so We underwent this treatment.

2. In the discussion section, it would be appropriate to address, even if preliminarily, whether there is a specific population that could be directly eligible for this new alternative or if the intention is to establish therapeutic guidelines.

Reply:

Thank you for your advice. As we describe in the final part of the discussion, by accumulating cases of this surgical method for uterine fibroids associated with menorrhagia and tracking the long-term progress, we will be able to evaluate the clinical effectiveness of this technique in treating menorrhagia and its recurrence. We would like to examine this treatment method from various aspects, including the presence or absence of pregnancy, safety, changes in hormonal dynamics after surgery, pregnancy course after pregnancy, and delivery outcomes, and verify the suitability of this treatment method.

3. Figure 2B should follow Figure 2A and should not follow Figure 3A and 4A, because it violates the rule of continuity, please modify, and likewise please modify Figure 3B.-----3.

Figure file names should identify the figure and panel.

e.g. "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...".

Reply:

Thank you for your advice. We have now added figure citations in sequential order. In addition, added figure legends to the manuscript and revised figure file names.