

July 11, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format
(file name: ESPS Manuscript No.11808-Review.doc)

Title: Importance of Cardiological Evaluation for First Seizures

Author: Ho Choong, Ibrahim Hanna, Roy Beran

Name of Journal: *World Journal of Clinical Cases*

ESPS Manuscript NO: 11808

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

- (1) We have omitted the GCS and ED abbreviations as suggested since they were only used once throughout the manuscript.
- (2) We have incorporated the patient's first abnormal ECG finding into the same paragraph that described her first presentation and admission to the hospital (Case 1) as suggested.
- (3) In regard to the information on duration of each seizure or loss of consciousness, this proved problematic as this information was unreliable but the history of the event(s) is most convincing of generalised seizures. It would be inappropriate to include any information for which we cannot be certain and hence it was decided to exclude this requested data as to do otherwise may misrepresent the true facts.
- (4) In regard to the use of anticonvulsants, the patient in Case 1 was not treated with any antiepileptic medications upon her first seizure presentation. It is common practice not to treat a first seizure event that has resolved spontaneously. Upon diagnosis of LQTS, she had the appropriate treatment of beta-blocker and ICD, hence not requiring anti epileptic medication.

The patient in Case 2 was previously treated for presumed seizures with carbamazepine for about 10 years and had been off medication for 20 years when he presented. He was not commenced on regular anticonvulsants given his abnormal ECG finding that suggested LQTS. He was commenced on beta-blocker and had ICD insertion, as is appropriate.

3 References and typesetting were corrected although changes to the references were not highlighted in red as they merely reflected the expected format.

4 Those changes within the revised text have been highlighted in red as was requested.

Thank you again for publishing our manuscript in the *World Journal of Clinical Cases*.

Sincerely yours,

A handwritten signature in black ink, appearing to be 'Ho Choong', with a stylized, cursive script.

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