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The pathological association between sleep breath disturbances (SBD) and stroke. The review is rather exhaustive, but it could be ameliorated by a more detailed description of cerebral hemodynamics in patients with SBD. In particular in the acute phase of stroke (Kepplinger J, et al., J Neurol. 2014 - PMID: 24292644/ Kepplinger J, et al., Trials. 2013 - PMID: 23941576; Tsivgoulis G, et al., Stroke. 2011 – PMID: 21372308) I would also suggest adding 1 explanatory figure to better show the physiopathological link between stroke and SBD. A language revision is required.

Answer: The suggestion has been taken in consideration by adding the literature and related comments to the manuscript.

Peer Reviewer No. 00113121

The author presents an invited commentary related to sleep-disordered breathing and stroke. It has been carried out carefully and thoroughly. However some modifications are suggested to improve the quality of the paper. 1. Authors should clearly mention in the text that the only study published so far analysing sleep-related breathing disorders in acute lacunar stroke (J Neurol 2009; 256: 2036-2042), reported a total of 69.1% of patients with AHI greater than or equal to 10; 44.1% with AHI greater than or equal to 20 and 2% with AHI greater than or equal to 30. 2. It would be helpful to mention that Cheyne-Stokes (CS) respiration was documented

in 20.6% of patients with lacunar infarcts, which was in contrast with the previous idea that CS breathing pattern usually occurs in large strokes with unfavourable prognosis (Sleep Disorders 2012; Article ID 257890). This study should be added and commented on.

Answer: The suggestion has been taken in consideration by adding the literature and related comments to the manuscript.

Peer Reviewer No. *03327138*

Well-written commentary pointing to the risk-factor association of SDB and stroke. However, suggest to add a paragraph on potentially harmful effects of SDB during the acute phase of stroke (that may lead to early neurological worsening) to the paper, e.g., steal phenomenon, reversed Robin Hood syndrome, and also mention the ongoing Reverse-STEAL trial that is the first of it conducted in the hyperacute phase of stroke.

Answer: The suggestion has been taken in consideration by adding the literature and related comments to the manuscript.

Peer Reviewer No. *00227683*

It is a brief review on a relationship of sleep-disordered breathing (SDB) and stroke, in which authors reviewed risk of stroke in SDB patients, benefit of SDB treatment in patient with stroke, and discussed potential mechanisms. I have detailed comments as following: 1. Talk it with data, it is better that the authors could give estimated RRs or ORs for an increased risk of stroke in persons that diagnosed with SDB or a decreased risk of subsequent stroke in stroke patients with SDB after treatment like continuous positive airway pressure (CPAP) treatment in previous literatures. 2. In addition, “the review by Parra O. and Arboix A” and “the original study of Parra O. and Arboix A” occurred in the abstract and core tip but not in the invited commentary and literature. 3. A typo error: “leterature”.

Answer: The suggestion has been taken in consideration by adding the literature and related comments to the manuscript. English language was revised.