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**Name of Journal:** *World Journal of Clinical Cases*

**ESPS Manuscript NO:** 29984

**Manuscript Type:** Minireviews

**Reviewer's code:** 02453249

**Comments to authors:** An interesting review. Please add a vignette/figure/scheme on the anatomo-electrophysiologic features of the syndrome leading to supraventricular arrhythmias.

*Response: thank you for your suggestion. We have added a new figure (figure 1) to illustrate the anatomo-electrophysiologic features of Bayés syndrome.*

**Reviewer's code:** 00211908

**Comments to authors:** Very nice mini-review. Minor errors:

*Response: thank you for your careful review of our manuscript. Please, find below our responses to each of your points*

Page 9: IACB: please describe this abbreviation.

*Response: We have unified terms and we use IAB instead of IACB.*

Page 14: Ref 40: Please modify according the journal requirements.

*Response: Modified accordingly.*

Page 16: please consider "essential" instead of "esential".

*Response: Thanks, corrected.*

**Reviewer's code:** 00060498

**Comments to authors:** Revision recommended. Add: Management approaches- need for anticoagulation, other therapies. More figures can be added. Table 1 superfluous

***Response:** We are grateful for the time you expended on our behalf and the careful review of our manuscript.*

*In order to address your comments, we have added the following paragraph about management approaches and a new reference:*

*“There are currently no evidence-based recommendations on the most appropriate therapeutic approach for Bayés syndrome in any of the different cardiologic or neurologic guidelines for primary or secondary prevention of cerebral ischemia. A clinical case of a patient with Bayés syndrome reported antiarrhythmic treatment with amiodarone and anticoagulant administration with acenocoumarol<sup>[27]</sup>.”*

*We have also added a figure (figure 1) to better illustrate the Bayés syndrome.*

*We decided to retain Table 1 because it is highly demonstrative of the clinical characteristics of cardioembolic and non-cardioembolic cerebral infarcts which are precisely one of the core points of the present minireview.*

**Reviewer’s code:** 00227341

**Comments to authors:** The Authors present an interesting and well-written paper on Bayes syndrome and acute stroke. I suggest to accept it.

***Response:** We wish to thank you very much for your complimentary comments and from accepting our manuscript for publication.*