

Response to reviewers

Dear Editors,

Thank you very much for the comments from the editors and two reviewers of our work (manuscript ID: 45943). According to the comments and requests of this journal, we have made extensive improvement on our original manuscript, both in the manuscript text and the format of this journal. All corrections and supplementary materials are labeled in yellow in our revised version of manuscript. Our detailed point-by-point responses to the concerns are as follows.

We have revised the manuscript in line with all the reviewers' comments and we hope that the new manuscript can be acceptable for publication at "World Journal of Clinical Cases". If you have any questions, please feel free to contact us.

Many thanks for processing on our work.

Best regards,

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SPECIFIC COMMENTS TO AUTHORS

-Add the unique of this study compared to other studies discuss the same issue.

[Reply] Many thanks for this comment. We have added more information about the unique and strengths of this study. (Page 6, Paragraph 3)

The strengths of our case are as follows. First, our case revealed extensive T2-weighted abnormal signals in the spinal cord with a "flip-flop sign". To the best of our knowledge, only 2 cases of such longitudinally extensive T2-weighted hyperintensities with a "flip-flop sign" have been previously described [9, 14]. Thus, the technique of MRI could be of great importance to explore such disorders [26]. Second, our diagnosis of syphilitic myelitis was made based on the medical history of homosexuality, clinical presentations, physical examinations, laboratory examinations of serum and CSF, imaging findings regarding the "flip-flop sign", the benefit of penicillin and a favorable prognosis after treatment. Moreover, in view of the longitudinally extensive myelopathy on MRI, we also perfected AQP4 both in the CSF and the serum in a timely manner. The results were negative, and the misdiagnosis of neuromyelitis optica spectrum disorders was avoided. Third, to date, our study involves the largest body of literature exploring the clinical features of syphilitic myelitis with longitudinally extensive myelopathy on spinal MRI.

-Add more on the basic of this disease in the introduction

[Reply] Many thanks for this comment. This is a good suggestion. We have added this in the section of "introduction", also labeled in yellow. (Page 3, Paragraph 1-2)

-Discus role of advanced imaging of the spine using these ref Razek AAA. Ashmalla G. Assessment of paraspinal neurogenic tumors with diffusion-weighted MR imaging. Eur Spine J 2018;27:841-846.

[Reply] Many thanks for the comment. We have cited this work as reference 26.

-English language correction through the manuscript

[Reply] Many thanks for this comment. We have done this by AJE with the EDITORIAL CERTIFICATE.