

Dear Editor,

21th Mar 2019

Here we submit the revised Manuscript “Magic effects of long-pulse Alexandrite laser for the treatment of a high-risk infantile hemangiomas: case report and brief literature review” (ID:46442) to World Journal of Clinical Cases for consideration of publication.

We thank you for careful examination of the manuscript and thank the Reviewer for these insightful comments, which are very helpful in directing our efforts to enhance the scientific quality of this manuscript. We have attempted to address each of the Reviewers’ concerns and a detailed point by point response is provided below. The manuscripts has been retouched by American Journal Experts (Certificate Verification Key: 7987-31F9-D5BD-9BDA-D441).

We have highlighted the revised parts in Red and believe that the revisions following the Reviewers’ advice have substantially improved the manuscript which is now suitable for publication.

Thank you for your consideration.

With warm regards,

Yours sincerely

You-Hui Ke, Medical Cosmetology Department, Medical Cosmetology Department, Wenzhou Hospital of Integrated Traditional Chinese and Western Medicine, Wenzhou Skin disease and Plastic surgery Hospital , Wenzhou325000, Zhejiang Province, China.

Phone: +86-13867776098

E-mail: 672673450@qq.com

Reviewer reports:

Reviewer #1: Your manuscript is interesting, there are some letter and syntax errors like "a high-risk infantile hemangiomas" and "INTRUCTION" and "In addition, Owing to the risk of a" and "we proved that treated(ment of) thick/deep IH with long-pulse Alexandrite laser was clinically effective and safe " and "that makes this IH undergo (to harbor) a high risk of ulceration, infection, and even scarring" and "with a thick plaque of telangiectasia (hemangioma) covering most of the right labia majora " and "dyspigmentation which make the patients and their famalies significant effects," and "the particular location (labia majora) of IH makes it (to) undergoing a high-risk of ulceration, infection, and even scarring,"

Reply: Sorry for the mistake. We corrected it.

"According to the characteristic clinical course such as appearing in the first few weeks of the birth and exhibiting a characteristic sequence of growth and spontaneous involution, supported a diagnosis of IH." you did not observe involution before laser treatment, did you? so you must not include this in your diagnostic criteria; it is included in general diagnostic criteria not of yours.

Reply: Thank you for your suggestion, we did not did not observe involution before laser treatment and we corrected our diagnostic criteria in the part of FINAL DIAGNOSIS.

"During the laser treatment, no severe side effects were observed, only with blistering immediately after treatment," did you observe this side effect in each treatment session and in each part of the lesion?

Reply: Thanks for your concern. We did observe side effects in the previous treatments ,but not in each in each treatment session and in each part of the lesion, and a more detailed description in our previous study^[1].

"As a result, when the IH have to be treated is important, but difficult." What is the meaning of this sentence?

Reply: Sorry for the confusion, we wanna say is that the right time to treatment of IH is the most important issue and also the most difficult to grasp.

Topical application of timolol maleate eye drops are another minimally invasive modality for IH treatment. I advise you to include this modality to your review.

Reply: Thank you for your suggestion, we corrected it in our review.

"Weinstein C, Pozner JN, Ramirez OM. Complications of carbon dioxide laser resurfacing and their prevention. Aesthet Surg J. 1997; 17: 216-225. [PMID: 19327718]" seems unrelated to your topic.

Reply: Thank you for your suggestion, we corrected it.

Your references are too old, being the newest one is of yours and of 2014. Please

update your manuscript.

Reply: Thank you for your concern, we corrected it.

In clinical photographs why you did not use gloves?

Reply: Thank you for your concern, it is the hands of the patient's parents in the picture. Of course, it is better to wear gloves and we must pay attention to this issue in the future.

Reviewer #2:

-INTRODUCTION must be corrected.

Reply: Sorry for the mistake. We corrected it.

-Please refer to article "Kupeli S. Evolving strategy in treatment of infantile hemangiomas: from steroids to propranolol. *Cukurova Med J.* 2016; 41: 354-359." for more delineate indications for the treatment of infantile hemangiomas with an acronym easy to remember (GLUT-ONE) at the end of the first paragraph of the INTRODUCTION section.

Reply: Thank you for your constructive suggestion, we had added GLUT-ONE at the end of the first paragraph of the INTRODUCTION section.

-I would like to see possible side effects of Alexandrite laser application in a paragraph in DISCUSSION section.

Reply: Thanks for your suggestion. We've added the side effects of Alexandrite laser application in a paragraph in DISCUSSION section.

-In our series, regression in infantile hemangiomas and improvement in ulcerated ones were with the administration of propranolol in patients younger than 12 months. (Kupeli S. Use of propranolol for infantile hemangiomas. *Pediatr Hematol Oncol.* 2012;29:293-298.) This finding can be added into the 5th paragraph of the DISCUSSION to indicate the time period that the propranolol works better.

Reply: We appreciate your constructive suggestion. We've added this finding in DISCUSSION section.

- 1 Su W, Ke Y, Xue J. Beneficial effects of early treatment of infantile hemangiomas with a long-pulse Alexandrite laser. *Lasers Surg Med.* 2014;**46**:173-179.[PMID:24391080.DOI:10.1002/lsm.22221]