

We would like to thank the Editor and the Reviewers for this review of our paper, *"Isthmocele, cause of secondary infertility, is linked to persistent hydrometra and corrected by hysteroscopic surgery: a case report."* (Ref.: 42980). We have considered comments and have taken the appropriate actions. For all reviewers, we have written a reply below.

Reviewer 04149948

1. It would be more appropriate to change the title, removing the affirmation that isthmocele is a cause of secondary infertility. This is still controversial and requires more controlled studies. Also, the focus of the case is how the procedure resolved the hydrometra problem.

*Response: We agree with the reviewer that the title does give an inappropriate assumption. Therefore, we changed the title to: "A case report of successful treatment with hysteroscopy for infertility due to isthmocele and hydrometra secondary to cesarean section."*

Reviewer 00742373

1. Title: the title need to improve. How about A case report of successful treatment with hysteroscopy for infertility due to isthmocele and hydrometra secondary to C-section.

*Response: We agree with the reviewer and change the title to this version.*

PDG should be PGD (preimplantation genetic diagnosis)

*Response: We thank the reviewer for noticing this mistake. We verified that all abbreviations were correct.*

Reviewer 02728252

*Response: We thank the reviewer for their review.*

Additionally, we did take care of the next list of modifications that were added to the manuscript file:

You need to provide the grant application form(s) or certificate of funding agency for every grant, or we will delete the part of "**Supported by...**".

We upload the document that accounts for this grant being approved and issued by Conacyt (Consejo Nacional de Ciencia y Tecnología, México), the government agency that supports research in our country, and granted to Professor Esther López Bayghen, corresponding author of this paper. The document is in Spanish; we hope this would not be a problem.

Please provide the ORCID number of each author.

We now provide all ORCID numbers in the manuscript

All authors are requested to sign the Copyright License Agreement.

The file has been added to the uploaded attachment since the initial submission; we re-upload the same document

The abstract structure should change following specific instructions

We did take care of all modifications suggested making the abstract suitable for the journal requirements, attending to changes in format and length.

Please modify the referenced references in this format

We did so accordingly to suggested format.

Please change the main body of the case report to the following format. *Under the heading of Case Presentation, the following seven aspects must be presented in this order: 1) Chief complaints; 2) History of present illness; 3) History of past illness; 4) Personal and family history; 5) Physical examination upon admission; 6) Laboratory examinations—e.g.,*

*routine blood tests, routine urine tests and urinary sediment examination, routine fecal tests and occult blood test, blood biochemistry, immune indexes, and infection indexes; and 7) Imaging examinations—e.g., ultrasound, plain abdominal and pelvic CT scan, high-resolution chest CT scan, and head MRI. The patient case presentation should be descriptive, organized chronologically, accurate, salient, and presented in a narrative form.*

**We did so, accordingly to instructions.**

If there are consultations, please provide the consultation records of each expert in this format.

**We agree with the consultations added by the editor.**

Please provide the decomposable figure of Figures, whose parts are movable and editable. So you can put the original pictures in PPT and submit it in the system.

**We did so; figures were independently uploaded in eps format (Illustrator software) which make them editable.**

Your manuscript should be prepared with Word-processing Software, using 12 pt Book Antiqua font and 1.5 line spacing with ample margins.

**We performed this formatting. Additionally, the next minor details were all corrected:**

- **Please check and confirm that there are no repeated references!**
- **Please don't include abbreviations in the title of the figure/ table.**
- **Please explain all the abbreviations in the figure/table legends: full name (abbreviation).**
- **Please explain all the abbreviations of each figure/table under each piece of figure/table legends.**

For citation purposes, we did provide all authors abbreviation names and manuscript title.

*In the references, please add PubMed citation numbers (PMID NOT PMCID) and DOI citation to the reference list and list all authors. Please revise throughout. The author should provide the first page of the paper without PMID and DOI.*

*PMID (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed>) (Please begin with PMID:) DOI (<http://www.crossref.org/SimpleTextQuery/>) (Please begin with DOI: 10.\*\*)*

**We did so in all the references that were published in English. We had to cite a work published in Spanish without these numbers that is relevant as the data about cesarean procedures in our Country is relevant to our case.**

Audio core tip: In order to attract readers to read your full-text article, we request that the author makes an audio file describing your final core tip, it is necessary for final acceptance.

**We did so and uploaded the file in mp3 format.**

**We provide the CARE list, and the English certificated as independent files.**

We hope very much that our manuscript is now suitable for publication.



Dra. Esther López Bayghen

Cinvestav-IPN

Ingenes, México