July 16, 2021

Dear Editor,

Title: Extensive abdominal lymphangiomatosis involving the small bowel mesentery: A

case report and review of the literature

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Name of Journal: World Journal of Clinical Cases

Manuscript No: 69341

Thank you for your comments on our manuscript. We have studied your comments as well as the peer reviewer's comments and the raised issues carefully.

The peer reviewer's comments on the manuscript and my response:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: An interesting case report

Answer: Thank you very much for your comments. A new proofreading and language polishing was performed by https://www.proof-reading-service.com to improve language quality and the proofreading certificate is uploaded. Language Quality Evaluation using the free tool provided by AJE.com now shows a current score of 9.0 (96th percentile) compared to 3.8 (34th percentile) previously.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: 1. The manuscript present the case of a 32-year-old male presented with short onset abdominal pain and melena. The patient reported no pain after 1 week of using oral paracetamol three times per day and was asymptomatic on

short term follow-up. Is paracetamol no significant effect on melena? 2. No other treatment?

Answer:

The patient started taking 1g of oral paracetamol three times a day before presentation to the clinic. Since an improvement in pain was reported, the treating physician decided to avoid NSAIDS. He advised the patient to continue with the oral paracetamol to control the pain. The pain and melena subsided spontaneously. The patient did not receive nor offered any other treatment.

We added the following sentence to the discussion section:

The patient reported a good response to self-prescribed oral paracetamol to control the pain. Paracetamol has been traditionally considered a safer alternative to non-steroidal anti-inflammatory drugs (NSAIDs). Thus, the treating physician advised the patient to continue with the recommended dose of paracetamol for 1 week. The patient did not receive any other treatment.

A new proofreading and language polishing was performed by https://www.proof-reading-service.com to improve language quality and the proofreading certificate is uploaded.

The editorial office's comments on the manuscript and my response:

(1) 1% is indicated in the abstract and 5% is indicated in Core tip. Please remove the inconsistency.

Answer: This unintentional typing error was corrected. The sentence in Core tip after correction:

Abdominal lymphangiomatosis is rare, accounting for less than 1% of all cases of lymphangiomatosis.

(2) The title is too long, and it should be no more than 18 words.

Answer: The title of our manuscript has been shortened.

The new title is composed of 16 words "Extensive abdominal lymphangiomatosis"

involving the small bowel mesentery: A case report and review of the literature"

(3) The authors did not provide original pictures. Please provide the original figure

files. Please prepare and arrange the figures using PowerPoint to ensure that all graphs

or arrows or text portions can be reprocessed by the editor.

Answer: I have organized all decomposable original pictures into a single PowerPoint

file so that all graphs or arrows or text portions can be reprocessed by the editor. The

file has been uploaded to the system.

(4) Please, provide Conflict-of-Interest Disclosure Form and Copyright License

Agreement.

Answer: The Conflict-of-Interest Disclosure Form and Copyright License Agreement

have been uploaded to the system.

In addition, all references were edited using the Auto Analyser to ensure the correctness

of all reference information.

Thank you again for publishing our manuscript in the World Journal of Clinical Cases

Sincerely yours,

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3