

60823-Answering Reviewers

January 5, 2021

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 60823, Case Report)

**Title:** Laryngopharyngeal Reflux Disease Management for Recurrent Laryngeal Contact Granuloma: A Case Report

**Author:** Kai Li, Wen-Yong Chen, Yun\_Ying Li, Tu-Lu Wang, Meng-Jia Tan, Zong Chen, Hai Chen

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

**Manuscript NO.:** 60823

The manuscript has been improved according to the suggestions of reviewers:

1. Format has been updated
2. All language issues in the manuscript based on the peer review report have been resolved.
3. Original pictures have been provided.
4. Revisions have been made according to the suggestions of the reviewers.

(1). **Comment:** 1. "the authors do not state the aim of the study nor emphasize why they want to publish this specific case."

**Author's response:** Thank you for bringing this inadvertent omission to our attention. The aim of this study has been added to the last paragraph of Introduction (Lines 101-103) "Thus, in order to help patients with multiple recurrences of LCG, we report a combined management regimen of pharmacotherapeutic treatments and lifestyle modifications.", and the rationale has been also briefly addressed in the Background section of the Abstract (Lines 35-37) "An appropriate strategy is therefore needed to help patients with multiple recurrences of LCG to potentially avoid unnecessary surgery."

(2). **Comment:** 2. “In addition, a summary of the case report is not appropriate for the introduction.”

**Author’s response:** Thank you for this valuable suggestion. The summary of the case report has been removed from the Introduction section and moved to the Discussion section. (Lines 176-184)

(3). **Comment:** 3. “The case presentation shows, how many of those patients with atypical reflux symptoms can be a diagnostic and therapeutic challenge.”

**Author’s response:** We appreciate this very thoughtful and constructive question. Based on the literature that is germane to this topic, including references 2, 5, 15, and 16, which we cite in the report, LPRD is currently believed to be the main cause of LCG and poses a difficult challenge for successful treatment. However, the incidence of LCG caused by LPRD has not been reported, so we are unable to provide a quantitative response as to the prevalence of unsuccessfully treated cases with atypical reflux symptoms.

(4). **Comment:** 4. “Where any symptom scores or objective measurements taken to objectify LPRD?”

**Author’s response:** We appreciate this very helpful comment towards improving the quality of our report. In fact, we used two highly reliable measurements to objectively quantify LPRD symptoms. We have included citations for these methods in the discussion section (Lines 187-192) as follows, “In addition to RFS, measurements of the reflux symptoms index (RSI) <sup>[9]</sup> and reflux symptom score (RSS)<sup>[10]</sup> can be obtained using electronic laryngoscopy before patients

receive treatment. Moreover, a Dx-pH measurement test, a new sensitive oropharyngeal pH device for detection of pH events that begin at the distal esophagus and travel upward to the oropharynx, can also be used for diagnosis of LPRD [11].”

(5). The title has been changed to: **“Laryngopharyngeal Reflux Disease Management for Recurrent Laryngeal Contact Granuloma: A Case Report”**;

We very much appreciate the helpful comments, careful consideration and diligence of the editor and reviewers towards improving the quality of our report. We have learned a lot through the review process and we feel the paper is much better as a result of their advice. Thank you again for publishing our manuscript in the *World Journal of Clinical Cases*.

Sincerely yours,

Hai Chen

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