

To: Professor Marco Matteo Ciccone

Department of Emergency and Organ Transplantation,

Bari University, Bari 70124, Italy

November 29th 2020, The Hague

Subject: re-submission Manuscript NO.: 58993, Case Report

Dear Professor Ciccone,

Please find enclosed our revised manuscript entitled *“Myasthenic Crisis Induced Takotsubo Cardiomyopathy in an elderly man; A Case report of an underestimated but deadly combination”*, with your reference number 58993. We thank the reviewers for their substantial amount of time spend on their valuable comments and have revised the manuscript accordingly. Please find our answers for each point below. We hope after revision, our case report is now sufficient for publication in World Journal of Cardiology.

With kind regards,

Sakir Akin, MD, PhD, Cardiologist-Intensivist

On the behalf of all authors

HagaZiekenhuis, Department of Intensive Care

Els Borst-Eilersplein 275,

2545 AA The Hague, The Netherlands

Telephone number: 00-31-642675027

E-mail: s.akin@hagaziekenhuis.nl

Reviewer 1:

Comment #1: Please discuss the paper from Guaricci AI et al Trends Cardiovasc Med. 2018 May;28(4):263-271.

Response 1: We thank the reviewer for this suggestion. We read the reference by Guaricci et al and have included its neurogenic/catecholaminergic hypothesis on causing myocardial stunning in the section Introduction.

Reviewer 2:

Comment #1: Add more on the basic of this disease in the introduction

Response 1: We thank the reviewer for this comment. We added more on the basic of both myasthenia gravis and takotsubo syndrome in the introduction.

Comment #2: Discus role of imaging using these ref -Abdel Razek AAK, Elrakhawy MM, Yossof MM, Nageb HM. Inter-observer agreement of the Coronary Artery Disease Reporting and Data System (CAD-RADS(TM)) in patients with stable chest pain. Pol J Radiol 2018;83:e151-e159

Response 2: We thank the reviewer for this suggestion. We read the reference by Razek et al and agree a CT-coronary-angiography could have been a quicker, safer alternative to assess the coronary arteries. We added this point in the section Discussion.

Comment #3: English language correction through the manuscript

Response 3: We thank the reviewer for this comment. We have read the manuscript thoroughly and made minor corrections accordingly.

Comment #4: Discus merits and limitations of technique applied

Response 4: We thank the reviewer for this comment. We have discussed several limitations of imaging modalities in the section Discussion. By using the references below we further optimized the discussion and updated our references.

- Abdel Razek AA, Al-Marsafawy H, Elmansy M, El-Latif M, Sobh S. CT angiography and MR angiography of congenital anomalies of pulmonary veins. J Comput Assist Tomogr 2019; 43:399-405.
- Abdel Razek AAK, Al-Marsafawy H, Elmansy M. Imaging of Pulmonary Atresia With Ventricular Septal Defect. J Comput Assist Tomogr 2019;43:906-911.