Author's response to reviews

Title: Giant intercostal aneurysm complicated with Stanford type B acute aortic dissection in patients by type 1 neurofibromatosis.

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Author's response to reviews: see over
Dear Dr Zamvar / Dr Taggart,

Thank you for your response regarding my manuscript titled "Giant intercostal aneurysm complicated with Stanford type B acute aortic dissection in patients with type 1 neurofibromatosis." I also would like to take this opportunity to express my gratitude to peer reviewers for their kind comments and suggestions. I took them seriously and revised my manuscript with the help from native English speaker.

Firstly, as a result of it, title has changed to "Giant intercostal aneurysm complicated by Stanford type B acute aortic dissection in patients with type 1 neurofibromatosis." I also made several revision to correct my English expression. I must admit that I should have been more careful and should have asked someone to correct my English before submitting it.

Secondly, regarding a comment from referee 2, I am deeply sorry to say that I could not find any histopathological test result from this patient’s “visceral aneurysm rupture”. It was done in other hospital many years ago and there was no report sheet of histopathological test in his medical record. Surgeon who did his surgery also could not recall histological finding. So I am really not sure whether any specimens were sent or not.

Finally, regarding a suggestion from referee 1, whether this article can be better presented as a short “Clinical Imaging” or not, I was also wondering a same thing as 3D image of intercostal aneurysm was impressive. However, I thought a form of case report was more appropriate because one of the points in this article was complication as a result of percutaneous coil embolization. I wanted to address fragile nature of blood vessels in this type of disease. But if editors and reviewers think that I should change the format, I am more than happy to do so.

I hope this new manuscript meet the standard for Journal of Cardiothoracic Surgery.

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