Author's response to reviews

**Title:** Dexmedetomidine Decreases the Emergence Agitation in Infant Patients Undergoing Cleft Palate Repair Surgery after General Anesthesia

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**Author's response to reviews:** see over
Dear Editor:

Thank you so much for your E-mail and all the reviewers for the kind advice. We had revised the manuscript, finished the work required according to the reviewers’ comments and carefully proof-read the manuscript. Here below is our description on revision.

Referee 1:

1. The reviewer’s comment: The authors must give the details of post-operative analgesia that was administered.

   The authors’ answer: Before the end of surgery, analgesia pump was connected. Analgesia formula: total fentanyl $20 \mu g \cdot kg^{-1}$ was diluted to $100ml$ $0.9\%$ saline with $0.4 \mu g \cdot kg^{-1} \cdot h^{-1}$ constant rate infusion (Highlighted in line 92 of page 6).

2. The reviewer’s comment: Details of sample size calculations can be elaborated.

   The authors’ answer: Thanks so much for the reviewer’s kind advice. This study enrolled 40 American Society of Anesthesiologists (ASA) physical status I patients aged from $3$ months to $24$ months scheduled to undergo cleft palate repair (Highlighted in line 77 of page 6).

3. The reviewer’s comment: In group D, the HR and MAP were lesser than the group P. The authors must clearly mention in the methodology the cut-offs beyond which intervention would be done. Also, in the results section, please tell us about the children who required any intervention to tackle the hypotension/bradycardia.

   The authors’ answer: Intravenous injection with $0.25mg/kg$ Methoxamine Hydrochloride and $0.03mg/kg$ Atropine were performed to tackle the hypotension and bradycardia, respectively (Highlighted in line 125 of page 8).

4. The reviewer’s comment: The discussion should include the role of concomitant propofol
infusion which could have affected the overall incidence of EA.

**The authors’ answer:** Thanks for the reviewer’s kind advice and we had added the comments about the role of concomitant propofol infusion which could have affected the overall incidence of EA in the discussion section in line 156 of the manuscript.

**Referee 2:**

1. **The reviewer’s comment:** Define all abbreviations and acronyms the first time they are used in the abstract and in the text.

**The authors’ answer:** We are quite grateful for the reviewer’s kind reminding and we had revised all the full names of the abbreviations and acronyms in the manuscript (Highlight in the manuscript).

2. **The reviewer’s comment:** I don’t think the power analysis is adequate. If a sample size of 20 cases is suggested, at least 22 cases are required for possible drop-outs. Also, the calculations based on extubation time and agitation scores should be clearly reported respectively.

**The authors’ answer:** Thanks so much for the reviewer’s kind advice. The samples size is 20 because of the limitation of the surgery cases of this research. The extubation time means the time from post-surgery until the tube was extubated. We had added the agitation scores in the manuscript according to the reviewer’s comments.

3. **The reviewer’s comment:** Why there are web links in the first paragraph in the discussion section.

**The authors’ answer:** We are very sorry for the careless mistake and thanks for the kindly reminding. We had already corrected the mistakes in discussion section.

4. **The reviewer’s comment:** The limitations of the current study need to be mentioned.
The authors’ answer: The limitation of the current study was the samples size of the surgery cases of this research.

5. The reviewer’s comment: Please include the unit of age in Table 2.

The authors’ answer: We are quite grateful for the reviewer’s kind reminding and we had added the unit of age in Table 2.

6. The reviewer’s comment: Postoperative side effects presented in Table 4 can be included as recovery parameters into Table 3.

The authors’ answer: Thanks for the reviewer’s advice and we had put the ostoperative side effects presented in Table 4 into Table 3.

7. The reviewer’s comment: Define the time point of “operation” in Figure 2 and 3, and I can not find SD in Figure 2 to 4.

The authors’ answer: Operation is defined as the beginning of the operation, which is the beginning of a scalpel incision. SD was added in Figure 2 to 4.

8. The reviewer’s comment: I think this article needs some language corrections before it could get published.

The authors’ answer: We had revised the manuscript, finished the work required according to the reviewers’ comments and carefully proof-read the manuscript to minimize typographical, grammatical, and bibliographical mistakes.