Author’s response to reviews

**Title:** Streptococcus agalactiae infective endocarditis complicated by multiple mycotic hepatic aneurysms and massive splenic infarction: a case report

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COMMENT: Please condense the case presentation and the discussion. For the discussion, I would suggest focusing on the presentation, differential diagnosis, and management of hepatic artery mycotic aneurysms. The management of infective endocarditis is not novel, and is extensively published. REPLY: We have condensed the Case presentation and the Discussion as you requested, in particular we shortened the description of the management of infective endocarditis.

COMMENT: Please change the abbreviation for Streptococcus Agalactiae to GBS, for Group B Streptococcus. The abbreviation SA refers more commonly to Staphylococcus Aureus.

REPLY: Please see the revised version in which we change the abbreviation for Streptococcus Agalactiae (Background: page 4 line 58, 64; Case presentation: page 5 line 82, 95; Discussion: page 7 line 132, page 8 line 175).

COMMENT: Please revise the use of the word "extended" in line 83. Did you mean "extensive"?
REPLY: We have corrected our language mistake, please see the revised version (Case presentation: page 4, line 79).

COMMENT: Please revise the sentence formulation throughout the manuscript, but especially in the discussion (eg. Line 133, 135 etc…).

REPLY: We have reformulated the sentences at line 133 and 135. (Discussion: page 6, line 125 and 126).

COMMENT: Please revise the liver segment denomination throughout the manuscript (eg. In Line 117, it should read "segment VIII" and not "VIII segment").

REPLY: Please see the revised version: “Case presentation” page 6, lines 109-112.

COMMENT: Please revise the use of abbreviations throughout the manuscript (eg. Line 138).

REPLY: We have changed the abbreviation ENT (Ear Nose Throat) infections to “Upper respiratory tract infections” (Discussion: page 7, line 129).

COMMENT: Please use the same abbreviations consistently (eg. "day" compared to "die" in Line 80 and 90).

REPLY: Please see the revised version: “Case presentation” page 5, line 86.