**Author’s response to reviews**

**Title:** Risk factors of postoperative pulmonary complications in patients with asthma and COPD

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PULM-D-17-00336R1

Risk factors of postoperative pulmonary complications in patients with asthma and COPD

Dear Editor and Reviewers

Thank you very much for reviewing our manuscript, “Risk factors of postoperative pulmonary complications in patients with asthma and COPD (PULM-D-17-00336R1)”. We really appreciate the valuable comments made by reviewers. I attach here our revised manuscript, as well as point-by-point responses to the reviewers’ comments.

We believe that the manuscript has been significantly improved as a result of your suggestion and we hope that we have adequately addressed all of your comments.

Thank you in advance for your kind consideration of this paper.

Sincerely yours,

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RESPONSE

We wish to express our appreciation to the Reviewer for the insightful comments, which have helped us significantly improve the paper.

Technical Comment

1. Please confirm whether informed consent was written or verbal and clearly state this in your manuscript. If verbal, please state the reason and whether the ethics committee approved this procedure.
Response

We appreciate this comment on this point.

To clarify this state, we wrote the following sentences in the Declarations section (p22, line 3).

In the retrospective study, written informed consent from the participants involved was unavailable and unnecessary.

The Ethical Committee of Jikei University School of Medicine approved that patient consent was not necessary for this retrospective study (28-260(8503)). Instead, this study was posted on a bulletin board in this hospital.

Editor and reviewer’s Comment

Reviewers are satisfied with the authors revision and response to my comments. There are still some minor typographical errors e.g. page 4 under conclusions "or long operation time is that in patients with COPD”

Response

We apologized for typographical errors in our manuscript. We have corrected these errors.

Abstract section

P3, line 4: from “remains” to “remain”

p3, line 12: from “analyse” to “analyze”

p3, line 18: from “counts” to “count”

p4, line 5: from “or long operation time is that in patients with COPD”
to “or long operation time is a risk factor of PPC in patients with COPD”

Background section

P5, line 12: from “anesthetic” to “anesthetic”

Methods section

P6, line 11: from “Definitions of” to “Definition of”
P10, line 13: from “however” to “on the other hand”

Results section

P11, line 5: from “anesthesia” to “anesthesia”
P13, line 15: from “counts” to “count”

Discussion section

P16, line 11: from “eosinophils” to “eosinophil”

Table 2,5 and 6

From “sex” to “gender”