Author’s response to reviews

Title: HYPERHOMOCYSTEINEMIA IN BILATERAL ANTERIOR ISCHEMIC OPTIC NEUROPATHY AFTER CONVENTIONAL CORONARY ARTERY BYPASS GRAFT: A CASE REPORT

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Version: 2 Date: 22 Jul 2017

Author’s response to reviews:

Dear Editor,

Please find herewith enclosed the revised version of our manuscript entitled “HYPERHOMOCYSTEINEMIA IN BILATERAL ANTERIOR ISCHEMIC OPTIC NEUROPATHY AFTER CONVENTIONAL CORONARY ARTERY BYPASS GRAFT: A CASE REPORT” for publication on your Journal.

Find below the answer to the Reviewer(s) comments:

A clinical finding independent by surgery like hyperhomocysteinemia could increase the risk of ocular vascular damage and bilateral involvement in patient underwent Conventional Coronary Artery Bypass Graft. : This sentence needs correction

ANSWER: We modified this sentences.

In that paper authors analyzed many preoperative variables like age, medical history, Body Mass Index, mean arterial pressure and hematocrit founding no significant difference between 17 patients with perioperative ION and 34 control patients. : Edit this sentence

ANSWER: We have edited this sentence
In our patient we found different systemic and non-correlated-to-surgery factors like hypertension, mild anemia and diabetes which could had reduced tolerance to hypotension of optic nerve blood flow during CABG procedure.

ANSWER: We have edited this sentence

Furthermore we found also a moderate hyperhomocysteinemia probably correlated with patient smoking history.

ANSWER: We have edited this sentence

Hyperhomocysteinemia is an independent risk factor for myocardial infarction [8] which could promote atherosclerosis graft, one of the main limitations of long-term survival of patients underwent CABG, [29] but also a risk factor for vascular eye pathologies.

ANSWER: We have edited this sentence

Although the CCABG might induce many complications, the preoperative conditions of the patient like hyperhomocysteinemia could rise up postoperative complications especially when these clinical conditions are known like risk factors of ocular vascular damage.

ANSWER: We considered redundant this sentence. Thus we removed it.

We therefore hope that the manuscript now meets the interest of the editor and merits publication in your Journal.

Yours faithfully,

Alfredo Niro, PhD