Author’s response to reviews

Title: A suspected Case of Clostridium perfringens sepsis with Intravascular hemolysis after transhepatic arterial chemoembolization

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Author’s response to reviews:

Prof. Ashwini Esnakula, M.D., Ph.D.
Journal of Medical Case reports

Dear Prof. Esnakula,

We thank the referees for their many helpful comments. We have accordingly revised the manuscript: ID JMCRC-D-18-00467 entitled, A suspected Case of Clostridium perfringens sepsis with Intravascular hemolysis after transhepatic arterial chemoembolization and look forward to its publication in the Journal of Medical Case Reports.

Response to the Reviewer:
Thank you for your detailed comments. They have helped us improve our manuscript.
Comment 1 The recovery of C. perfringenes was made only at postmortem which weakens the diagnosis of sepsis. The title of the paper should change to include that sepsis was only possible or suspected. The role of C. perfringenes was never established during the life of the patient. Recovery at postmortem is not a proof of etiology. You need to include this weakness in the Discussion and throughout the paper. You always have to state that it is only a possible cause NOT PROVEN.

Reply: We accordingly clarified this in the revision.

Title
“A suspected Case of Clostridium perfringens sepsis with Intravascular hemolysis after transhepatic arterial chemoembolization”

Abstract
“Although the role of C. perfringenes was never established during the life of the patient, based on the clinical course and the culture from the hepatic abscess at postmortem, intravascular hemolysis secondary to Clostridium perfringens sepsis was suspected.

Discussion
“In the present case, the role of C. perfringenes was never established during the life of the patient. However, based on the severe clinical course and the culture obtained by fluid aspiration from the hepatic abscess at postmortem, intravascular hemolysis secondary to C. perfringens sepsis was suspected.”

Thank you again for your comments on our manuscript. I trust that the revised manuscript is now suitable for publication in the Journal of Medical Case Reports.

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