Author’s response to reviews

Title: A case of delayed neurological manifestation following Carbon Monoxide poisoning in Sri Lanka: Epidemiology of exposure and literature review

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Author’s response to reviews:

Dear sir/madam.

CASE REPORT: A case of delayed neurological manifestation following Carbon Monoxide poisoning in Sri Lanka: Epidemiology of exposure and literature review

Thank you for considering our manuscripts to published in your journal. I have done all the changes and answered to all questions of editor and reviewers’ comments. Further article was corrected by professional proof reader as requested. I have attached clean version of revised manuscript. Details of the changers and answers to editor and reviewers’ comments are mention below in this letter.

I would be grateful to you if you could consider this article to published in your journal. Please contact me if you need further correction or clarification and I am happy to reply them.
Best regards,

Prabhashini Kumarihamy.

POINT BY POINT ANSWERS TO EDITOR AND REVIEWERS

Editor Comments:

As you can see, the article is overall considered favorably. However, please be certain to have your article professionally proofread and corrected by an editing and proofreading service.

Article was corrected by professional proof reader.

- How was the CO value in the blood of the patients?
Patient was admitted to another hospital with initial incidence and CO poisoning was not suspected at this initial admission. Hence CO value in the blood was not measured and all exposure cases were sent home giving supportive care. When he admitted to our hospital with neurological presentation it was too late to do it. We have included a statement to this effect under the discussion in the manuscript (page 201 -204)

PAGE NO 10, LINE NO 201-204- new sentence was added ‘We did not measure CO in the blood in the index case and other exposed victims due to delayed presentation of weeks to THP. Thus, the diagnosis was purely based on clinical and epidemiological evidence as per we have highlighted above.’

- The CO value is essential to determine the poisoning by CO. Did you determine CO poisoning by clinical symptoms alone?
As I mentioned earlier, by the time he admitted under our care it was too late to measure the level as already 7 weeks has elapsed from initial exposure. CO poisoning was suspected not only with clinical symptoms but also with the definitive exposure history. We have clearly mentioned in the main text that on two occasions, workers who slept in the same room developed similar symptoms after few hours. In both incidences, there had been a power failure requiring power to be generated by this generator After that, the work place was examined and found to have newly implanted petrol driven generator, in the ground floor of the two story building in which all of them slept, emitting carbon monoxide when it is on and this was confirmed and then the generator was removed and no incidence was reported thereafter. (page no 8, line no 151-154)

- Tables and figures are supposed to be self-explanatory. Please explain the meaning of the abbreviations (e.g SGOT) just below the table, as well as add the reference values in a column separate.
Most of the name of test were written in the table itself (WBC as white blood cells, HB as haemoglobin, PLT as platelet and SGOT was changed as AST and SGPT was changed as ALT. Meaning of the abbreviations were explained below the table.
AST-Aspartate aminotransferase, ALT- Alanine aminotransferase, CSF- cerebrospinal fluid, WBC
-white blood cells, HSV-Herpes simplex virus
Reference values were added in separate column
- Authors should cite approval on the ethics committee.
We have obtained necessary written informed consent and maintained the anonymity. A statement to this effect has been included under ethics in the manuscript.

Reviewer reports:

Nasim Zamani (Reviewer 1):
dear authors, Thank you for clarifications. I am now convinced with your answers
I just would like to suggest evaluation of the text by some English expert or a medical editor due to some minor linguistic errors in the text
Main text was corrected by a professional proofreader and few corrections were made.

Marcelo Arbo, Ph.D. (Reviewer 2):
Not asked for revision

Main text was corrected by a professional proofreader and few corrections were made.
PAGE NO1, LINE NO 17 & 18 spelling correction to ‘peradeniya’ done
PAGE NO 5, LINE NO 97-spelling correction done- ‘pulse-oximeter’
PAGE NO 5, LINE NO 103- self care corrected as self-care
PAGE NO 6, LINE NO 113- spelling correction done- hyperreflexia
PAGE NO 6, LINE NO 122- spacing done between haemorrhage (Figure 2
PAGE NO 8, LINE NO 163 -spelling correction done- Sequalae
PAGE NO 6, LINE NO 159- ‘s’ of sinemet -upper case added ‘Sinemet’
PAGE NO 11, LINE NO 231- spelling correction done ‘pathophysiological’
PAGE NO 12, LINE NO 247- semicentrum ovale was changed as centrum semiovale
PAGE NO 12, LINE NO 252- neuronspecific- spacing done ‘neuron specific’