

Peer Review File

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Reviewer A

Comment 1: Authors present A Case Report on The Integrative Medicine Management of Median Arcuate Ligament Syndrome. Please clearly state what is unique about this case report. You performed acupuncture at multiple points such as LI 4, LI 10, LV 3, ST 23-25, ST 36, SP 6, SP 10, REN 6, REN 12, REN 13, KI 3, GB 34, and GB 41 for the relief of the pain due to MALS. I guess it is unclear to readers which points were more effective for the pain. You need to discuss and demonstrate more deeply using figures and pictures.

Reply 1: ST23-25, REN 6, 12, 13 were local points used for abdominal pain while LI4 and LV3 were systemic points to reduce pain and induce calm. We agree that this was not clear initially, so we further specified in the text (see below) as well as in Figure 3 diagramming the points utilized.

Changes in the text: Please see page 3, lines 108-114; page 4 line 200-201; page 5 line 202-224; also please see figure 3.

Comment 2: Why didn't you describe the surgery for MALS in the Case Presentation section?

Reply 2: We did briefly describe the surgery that was done (ex-lap with surgical release) 3 weeks after hospital discharge; we did not go into further details on the surgery since the focus of this article was on acupuncture as an adjunct for managing the pain.

Changes in the text: Page 3, Line 127-128.

Comment 3: The ethic statement should commonly be put before the Reference section.

Reply 3: We have put the ethical statement before the reference section.

Changes in the text: Page 8, 298-303.

Comment 4: The manuscript contains too many errors, which were particularly related to abbreviations and privacy protection. Please properly proofread prior to submission.

Reply 4: We have fixed the abbreviations both in the abstract and main text. We also edited the timeline to remove dates that could breach privacy protection.

Changes in the text: Page 1, line 14-16 and 23-24; see Figure 1 for updated timeline.

Comment 5: Abstract

Line 23

"... a history of IBS presented with ..."

What does IBS mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Reply 5: We changed it.

Changes in the text: abstract line 23 and page 2 line 65.

Comment 6: Introduction

A: Line 51

“, laparoscopic MAL release, ...”

What does MAL mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Case Presentation section

Reply 6A: We changed it

Changes in the text: Please see page intro line 55

B: Line 76

“... demonstrated LA Grade ...”

What does LA mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Reply 6B: We changed it, it means Los Angeles

Changes in the text: Please see page 2 line 89

C: Line 79

“... level of the median arcuate ligament with ...”

Median arcuate ligament should be written as MAL because you already used MAL in line 51.

Reply 6C: We changed it

Changes in the text: Please see line 76 page 2

D: Line 79

“... dilatation (see Figure 3)”

Figure numbers must be numbered consecutively in the order of appearance.

Reply 6D: We changed and removed the figures and numbered the remaining in consecutive order

Changes in the text: page 2, line 91-95

E: Lines 80-81

“... with median arcuate ligament syndrome.”

Median arcuate ligament syndrome should be written as MALS because you already used MALS in line 39.

Reply 6E: We changed it

Changes in the text: page 2 line 76

F: Lines 88 and 104

You should delete this date information due to privacy protection.

Reply 6F: We changed it

Changes in the text: Removed from manuscript

G: Line 93

“From a TCM perspective, ...”

What does TCM mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Reply 6G: We changed it

Changes in the text: page 3, line 99

Comment 7: Discussion section

A: Line 123

“... placed median arcuate ligament (MAL).”

MAL has already emerged before. Please delete median arcuate ligament.

Reply 7A: We changed it

Changes in the text: page 3 line 130

B: Line 206

“... model of IBS, ...”

What does IBS mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Reply 7B: IBS was already spelled out on page 2 line 65

Changes in the text: page 5 line 220

Comment 8: Table 1

You should delete the date information in Table 1 in terms of privacy protection.

Reply 8: We changed it

Changes in the text: Please see figure 1

Comment 9: Figure 1

The figure is not necessary because I guess lots of readers already know this. Also, where did Figure 1 appear in this article?

Reply 9: We changed it

Changes in the text: Removed figure

Comment 10: Figure 2

The figure is not also necessary because it doesn't provide useful information in this article. Instead of this, you should put a figure of your operative data. Removed –

Reply 10: We changed it

Changes in the text: Removed figure from manuscript

Comment 9: Figure 3

The image was not informative. It should be magnified to focus on the anatomy of MALS. Magnified

Reply 11: We changed it to be more magnified and clearer and also had pre- and post- surgical release images side by side for better visualization and comparison

Changes in the text: See Figure 2A and 2B

Comment 12: Lines 97-98

“.. LI 4, LI 10, LV 3, ST 23-25, ST 36, SP 6, SP 10, REN 6, REN 12, REN 13, KI 3, GB 34, and GB 41.

What do LI 4, LI 10, LV 3, ST 23-25, ST 36, SP 6, SP 10, REN 6, REN 12, REN 13, KI 3, GB 34, and GB 41 mean? The first time you use an abbreviation, present both the spelled-out version and the short form.

Reply 12: Spelled out version added

Changes in text: Please see page 3 lines 108-114

Reviewer B

Comment 1: Any other means of feeding were attempted before jumping to TPN, if not, what was the reason. Eg g tube, GJtube, jejunostomy

Reply 1: No other means of feeding were attempted. The decision to trial TPN was based on general surgery inpatient recommendations given the patient's prolonged inability to tolerate PO intake and significant weight loss. TPN was recommended to regain strength prior to surgery and ensure patient was not at risk of nutritional deficiencies. Also, since this was a temporary measure prior to surgical release in a patient with prior history of multiple abdominal surgeries, procedure to place G-tube or GJ-tube were forgone.

Changes in text: Added in patient's initial weight page 2 line 67.

Comment 2: Was a Doppler US done if so what were the findings.

Reply 2: Not a doppler ultrasound of the celiac artery in the records, she did have abdominal ultrasound which visualized normal aorta.

Changes in text: See page 2, line 86-87.

Comment 3: What was the recommendation of the surgeons as you commented that they were consulted but no surgical intervention was achieved

Reply 3: Please see comment above about TPN. MAL surgical release was recommended however as it was not an urgent surgical intervention, surgery was delayed until after discharge and was described in the text.

Changes in text: Please see Figure 1 for surgical description also page 2, line 76. And page 3 line 129-130.

Comment 4: Although significantly interesting and promising, would be more conservative in terms of recommending acupuncture

Reply 4: We discussed that acupuncture was successful for this patient by adding in a personal anecdote from the patient and more conservative in our final summary

Changes in text: Please see page 5 line 242-244 and 246-249

Comment 5: I'd clarify in the discussion that although MRA is significant for MALS, pain could be explained for other reasons as patient had already multiple issues with

pain, multiple interventions and more importantly definitive diagnosis would be proven after MAL is released demonstrating symptoms improvement

Reply 5: Yes, you are correct – we updated the text with this data and an explanation

Changes in text: Please see page 5 lines 240-243