Peer Review File

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[Responses to the comments by reviewer A]

This manuscript is a didactic report that the patient with alcoholic cirrhosis seemed to

have avascular necrosis (AVN), because of her medical history and physical findings,

however, she had iliopsoas hematoma as a result. Although the novelty is a little,

considering the frequency and ages of AVN, a highly urgent disease such as hemorrhage

like this case should not be overlooked. There has never been a report like this, herein it

makes this report meaningful.

Reply: Thank you your comment.

[Responses to the comments by reviewer B]

First, I would like to congratulate authors on submitting this manuscript. Spontaneous

hemorrhage is a fascinating problem with many times having high morbidity and

mortality without clear set guidelines for management. Liver cirrhosis and alcohol use

disorder can tilt the fine balance between pro-coagulation to anti-coagulation. This is a

well written case report highlighting a rare site of bleeding in patients with liver cirrhosis.

Few comments:

Comment 1: The patient likely has alcoholic hepatitis on admission. it would be

interesting to know what the Maddery's discriminant function is and whether

corticosteroids would be indicated/were used in the treatment?

Reply 1: Thank you your comment. The Maddrey's discriminant function score was 31.8.

Corticosteroid treatment was not indicated.

Changes in the text: We inserted statements regarding the Maddrey's discriminant

function. (See Page 4, Line 59-60)

Comment 2: Would recommend highlighting the need for CT abd/pelvis in the case

presentation body itself. This will help readers understand the decision making behind

obtaining a diagnostic test. For example, given acute anemia CT abd/pelvis was obtained

to rule out retroperitoneal hemorrhage or whatever the thought process was of the

treating physician.

Reply 2: Thank you your comment. We have already mentioned the cause of conducting

CT scan in the discussion section, but we also added the decision making process in the

case presentation.

Changes in the text: We have modified our text as advised. (See Page 4, Line 61-62)

Comment 3: It is also important for the readers to highlight in discussion section some of

the other rare spontaneous bleeding emergencies in patient with cirrhosis. Example

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Reply 3: Thank you your comment. We inserted some of the other rare spontaneous

bleeding emergencies in discussion section.

Changes in the text: We have modified our text as advised. (See Page 6, Line 91-92)

[Responses to the comments by reviewer C]

In the present manuscript, Kim et al. depicted a case in a cirrhotic patient with iliopsoas muscular haematoma which mimicked avascular necrosis.

The case itself seems quite rare, but considering the coagulopathy of the LC patient, it could also arise by chance, so this report is not entirely of novelty or rarity.

The manuscript is decently-written as well as concise nonetheless, and hence and my evaluation is that the paper's contents could be of interest to the readership of APM.

I kind of find that, however, the discussion is a little bit meagre.

The manuscript will be much improved when authors discuss 'optimal diagnosis' and 'proper treatment' a bit further.

Reply: Thank you your comment. We edited the discussion section to clarify the statement.

Changes in the text: We have modified our text as advised (See Page 7, Line 116-117).