

Peer Review File

Article Information: <http://dx.doi.org/10.21037/jss-20-609>.

Reviewer A

Comment 1: Add case report as one of the keywords too.

Reply 1: we completed the keywords by adding “case report”.

Changes in the text: we added “case report” at the keywords (see page 2, line 28-29).

Comment 2: The abstract is too short. Word limit is 200~350. Please add more detailed takeaway lessons.

Reply 2: examination revealed a grade 3 varicocele which was confirmed by Scrotal Doppler US and a lumbar CT scan. The patient was treated with Platelet anti-aggregation. Varicocele appears as an uncommon complication of ALIF.

Changes in the text: we have modified our text as advised (see page 1, line 23-25).

Comment 3: No history or family history information that might be related to the varicocele.

Reply 3: the patient’s medical history could not be related to the varicocèle.

Changes in the text: we added the patient’s medical history (see page 2, line 53-54).

Comment 4: There is no presentation about how the authors treat/handle the varicocele complication. What's/what're the interventions? How's the result? Any further adverse events? Any further follow-up?

Reply 4: the patient was treated with acetylsalicylic acid 160 mg per day, he was seen at control intervals of 1, 3 and 5 months. Progress was seen as we had a regression of the varicocele. No adverse event was identified.

Changes in the text: we have modified our text as advised (see page 3, line 58-61).

Comment 5: No discussion about the strengths and limitations of this manuscript.

Reply 5: we detected an ALIF complication not previously described.

Changes in the text: we have modified our text as advised (see page 4 line 82-89).

Comment 6: On line 104~105, the authors mentioned that the platelet anti-aggregation resulted in a regression of clinical signs. However, the authors did not carry out suggestions for future improvement.

Reply 6: this finding should be subject to evaluate platelet anti aggregation in the treatment of varicocele.

Changes in the text: we have modified our text as advised (see page 5, line 116-118).

Comment 7: No final takeaway lessons from this case report.

Reply 7: varicocele appears as a rare complication of ALIF, This complication is due to the mechanical stress exerted on the left spermatic veins during this surgery. Its treatment differs from the usual treatment of varicocele.

Changes in the text: we have modified our text as advised (see page 5, line 113-116).

Comment 8: Importantly, it seems this manuscript did not receive patient consent?

Reply 8: the patient has consented to the presentation of his case. We sent the written informed consent.

Changes in the text: we added “Written informed consent was obtained from the patient.” (See page 3, line 63).

Comment 9: Though having discussed the causal relationship between ALIF and varicocele reasonably in the discussion, the tone is too absolute. Without a sufficient medical history introduction, it cannot be ruled out whether there are other causes of varicocele instead of ALIF.

Reply 9: the patient has no personal or family medical history that may be related to varicocele.

Changes in the text: we have modified our text as advised (see page 2, line 53-54)

Reviewer B

Thank you for allowing me to review the manuscript entitled: “Varicocele Complicating an Anterior Lumbar Interbody Fusion: A Case Report”. This is a well written and well documented case report of an adverse event associated with an anterior retroperitoneal exposure of the lumbosacral spine. The illustrations add a great deal to the manuscript and the reader’s understanding of the issues involved in this adverse event. I learned a great deal for this manuscript. This manuscript should be accepted without further revisions.