

Review Form 3

Journal Name:	International Journal of Medical and Pharmaceutical Case Reports
Manuscript Number:	Ms_IJMPCR_130151
Title of the Manuscript:	High-Dose Epoprostenol and Adjunct Therapies for Refractory Raynaud’s Phenomenon Associated with Anti-Jo Antibodies: a Case Report
Type of the Article	Case report

PART 1: Comments

	Reviewer’s comment	Author’s Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.		
Is the title of the article suitable? (If not please suggest an alternative title)		
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.		
Is the manuscript scientifically, correct? Please write here.		
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.		

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Is the language/English quality of the article suitable for scholarly communications?		
<u>Optional/General</u> comments	<p>This case report is highly informative and provides valuable insights into a neglected area which encompasses the management of major vascular ischemic complications in patient affected by autoimmune disorders other than systemic sclerosis.</p> <p>Despite the significance of the content in this case report, there are notable formatting errors in the manuscript. The authors should present a more refined and formal version, utilizing a clearer narrative style and structured English that adheres to scientific rigor.</p> <ol style="list-style-type: none">1. The authors please provide to update “anti-Jo antibodies” to “anti-Jo-1 antibodies” both in the title and abstract.2. The authors should consider to update the first sentence of the abstract “This case report highlights the use of high-dose Epoprostenol for managing severe digital ischemia associated with antisynthetase syndrome (ASyS) and anti-Jo antibodies” with “This case report highlights the use of intravenous high-dose Epoprostenol for managing severe digital ischemia in a patient diagnosed with antisynthetase syndrome (ASyS) exhibiting anti-Jo1 antibodies positivity...”3. In the first sentence of the introduction to substitute the term “vascular compromise” with “vascular damage or vascular impairment”4. To update the sentence ” Current treatment guidelines emphasize the use of systemic corticosteroids as a first-line therapy to manage inflammation. Methotrexate and other immunosuppressants, such as Azathioprine, are often used as adjunct” to “Current recommendations for the management of chronic inflammatory process in patients affected by myositis, emphasize the use of systemic corticosteroids as initial therapy, while immunosuppressants should be employed as adjuncts”5. To update the sentence “However, in cases resistant to standard treatments for Raynaud’s phenomenon, alternative options such as intravenous prostacyclin analogs, including Epoprostenol, are considered” to “However, therapeutic options addressing vascular involvement in ASyS are still lacking, particularly in refractory RP forms. In these cases intravenous prostacyclin analogs, including Epoprostenol, should be considered” <p>I recommend that the authors thoroughly review the entire manuscript, implementing a more coherent structure and improving the overall clarity of the text.</p>	<p>Dear Reviewer,</p> <p>Thank you for your detailed and thoughtful feedback. We appreciate your recognition of the significance of this case report in addressing a neglected area of autoimmune-related vascular complications.</p> <p>We have carefully addressed all your suggestions, and the changes have been implemented and highlighted in the updated manuscript as follows:</p> <ul style="list-style-type: none">• Updated “anti-Jo antibodies” to “anti-Jo-1 antibodies” in both the title and abstract.• Revised the first sentence of the abstract to: “This case report highlights the use of intravenous high-dose Epoprostenol for managing severe digital ischemia in a patient diagnosed with antisynthetase syndrome (ASyS) exhibiting anti-Jo-1 antibody positivity...”• Substituted the term “vascular compromise” with “vascular damage or vascular impairment” in the introduction.• Updated the sentence on treatment guidelines to: “Current recommendations for the management of chronic inflammatory processes in patients affected by myositis emphasize the use of systemic corticosteroids as initial therapy, while immunosuppressants should be employed as adjuncts.”• Revised the sentence on therapeutic options for Raynaud’s phenomenon to: “However, therapeutic options addressing vascular involvement in ASyS are still lacking, particularly in refractory RP forms. In these cases, intravenous prostacyclin analogs, including Epoprostenol, should be considered.”• Additionally, we have thoroughly reviewed and refined the manuscript for coherence, clarity, and adherence to scientific rigor as per your recommendations. <p>Thank you for your valuable insights, which have greatly improved the quality of our work.</p>

PART 2:

	Reviewer’s comment	Author’s comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	The authors declare that they have no conflict or competing interests.