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To: Dr Arifin thohar@fk.undip.ac.id

### Dear Dr Arifin,

Thank you for your recent submission to International Journal of General Medicine, titled "Neuro-endovascular Intervention in traumatic Carotico-Cavernous Fistulae (CCF): A Single-Center Experience" which has been received.

You uploaded the following files with this submission: 273603-tabel-ccf-final.docx 273603-figure-ccf-final.docx 273603-ms.docx

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Please now complete the disclosure form by clicking on the following link: https://www.dovepress.com/icmje\_coi.php? submission\_id=273603&author\_id=1216058&I=amuiZzvcMSIkNp4ScGG6TADB1216058

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Many thanks for your submission.

Yours sincerely

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Ms Tozer Editorial Department Dove Medical Press www.dovepress.com - open access to scientific and medical research (ID: 273603) From: Georgia Watson georgiawatson@dovepress.com

Subject: Manuscript submitted to Dove Medical Press - Response Required

Date: 10 August 2020 12.55

To: Dr Thohar Arifin thohar@fk.undip.ac.id

Dear Dr Thohar Arifin,

Thank you for your manuscript submission to International Journal of General Medicine. On behalf of the Editor, I would like to inform you that your submitted manuscript 'Neuro-endovascular Intervention in traumatic Carotico-Cavernous Fistulae (CCF): A Single-Center Experience' (273603) has been peer-reviewed and may be considered for publication after the necessary revisions are completed to the Editors satisfaction.

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Kind Regards,

Georgia Watson On behalf of Dr Scott Fraser Editorial Department Dove Medical Press www.dovepress.com - open access to scientific and medical research



MUHAMAD THOHAR ARIFIN <thohar@fk.undip.ac.id>

# ACTION REQUIRED International Journal of General Medicine - Your author proofs [ID 273603]

1 pesan

**Ms Lee** <boonlee@dovepress.com> Balas Ke: Ms Lee <boonlee@dovepress.com> Kepada: Dr Thohar Arifin <thohar@fk.undip.ac.id> 16 Oktober 2020 16.04

Dear Dr Thohar Arifin

The author proofs for your paper "Neuro-Endovascular Intervention in Traumatic Carotico-Cavernous Fistulae: A Single-Center Experience" [ID 273603] are now available by clicking this link: https://www.icorrectproof.com/dovepress/Home/Integra?XScrtVGFaw9F7aoEpky2Y+ WQcwvt2SkmtqHzibrdo1RiERQYtqydT/v/x+drrT0YbXhVz2ORtspH22VT/u7t1IQ9IRyWRhKXY2QQYwpk0A2G9va BuftqOE6z8nMzc96t

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# Manuscript ID number:

273603

# Title of paper:

Neuro-endovascular Intervention in traumatic Carotico-Cavernous Fistulae (CCF): A Single-Center Experience

# Reviewer 1

# Evaluations (peer review comments for the author)

**1**. In general, how do you rate the degree to which the paper is easy to follow and its logical flow? Fair

# 2. Do the title and abstract cover the main aspects of the work?

No. I disagree with the conlusion: the coiling procedure for occluding the CCF is a strongly effective and secure treatment for traumatic CCF. A considerable and permanent change in clinical signs and symptoms can be observed in most patients. The CCF treatment is different in many coutries and available meterials. Such in a Vietnam study, the balloon is the main option, the prognosis is good. The authors were honorable.

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Chi CT, Nguyen D, Duc VT, Chau HH, Son VT. Interv Neuroradiol. 2014 Jul-Aug;20(4):461-75. doi: 10.15274/INR-2014-10020. Epub 2014 Aug 28. PMID: 25207910 Free PMC article.

## 3. If relevant are the results novel? Does the study provide an advance in the field?

NA. The study is only a single center case collection.

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript? Yes

# Does the paper raise any ethical concerns?

Yes. For CCF treatment, the ethical concern is not a problem.

### 5. If relevant, are the methods clear and replicable?

NA. the method should be classified according the treatment options, such as TAE, TVE, or these two combination.

6. If relevant, do all the results presented match the methods described?

Yes

# 7. If relevant, is the statistical analysis appropriate to the research question and study design?

Yes. For this study, the statistical analysis is difficult to perform. Only descriptive analysis is appropriate.

# 8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis NA

**9.** How do you rate how clearly and appropriately the data are presented Fair

10. If relevant, did the authors, make the underlying data available to the readers?  $\ensuremath{\mathsf{Yes}}$ 

### 11. Do the conclusions correlate to the results found?

No. I suggest the authors rewrite the concusion.

### 12. Are the figures and tables clear and legible?

No. the figures should be reorgnized in photoshop, graphpad, or ppt. figure 6 and 7 are not clear, the orginal image should be provided,not the imaging from the computer screen by phone. the table is good.

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ss to scientific and medical research

### Are images clear and free from unnecessary modification?

No

### 13. I have serious concerns about the validity of this manuscript

No. Although the cases are not too much, the experience deserved to share to readers.

# 14. Does the paper use appropriate references in the correct style to promote understanding of the content? $\gamma_{\mbox{Ps}}$

# 15. Do you think that the manuscript requires its English grammar, punctuation or spelling to be corrected? $\ensuremath{\mathsf{No}}$

### Evaluation

1. the conclusion should be rewritten.

I disagree with the conlusion: the coiling procedure for occluding the CCF is a strongly effective and secure treatment for traumatic CCF. A considerable and permanent change in clinical signs and symptoms can be observed in most patients. The CCF treatment is different in many coutries and available meterials. Such in a Vietnam study, the balloon is the main option, the prognosis is good. The authors were honorable.

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2. the results should be classified accroding the approaches, such as transarterial, venous, et al...

3. please provide more clear images and reorgnized then in software.

the figures should be reorgnized in photoshop, graphpad, or ppt.

figure 6 and 7 are not clear, the orginal image should be provided, not the imaging from the computer screen by phone.



# Reviewer 2

# Evaluations (peer review comments for the author)

**1.** In general, how do you rate the degree to which the paper is easy to follow and its logical flow? Excellent

### 2. Do the title and abstract cover the main aspects of the work?

Yes. Good abstract.

**3. If relevant are the results novel? Does the study provide an advance in the field?** Yes. excellent.

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript? Yes

**Does the paper raise any ethical concerns?** No. Excellent.

5. If relevant, are the methods clear and replicable?  $\ensuremath{\mathsf{Yes}}$ 

6. If relevant, do all the results presented match the methods described?  $\ensuremath{\mathsf{Yes}}$ 

7. If relevant, is the statistical analysis appropriate to the research question and study design?  $\gamma_{\mbox{Ps}}$ 

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis Yes

**9.** How do you rate how clearly and appropriately the data are presented Excellent

10. If relevant, did the authors, make the underlying data available to the readers?  $\ensuremath{\mathsf{Yes}}$ 

11. Do the conclusions correlate to the results found?  $\ensuremath{\mathsf{Yes}}$ 

12. Are the figures and tables clear and legible?  $\gamma_{\text{PS}}$ 

Are images clear and free from unnecessary modification?  $\ensuremath{\mathsf{Yes}}$ 

**13.** I have serious concerns about the validity of this manuscript No. No concerns.

14. Does the paper use appropriate references in the correct style to promote understanding of the content?  $\gamma_{\mbox{Ps}}$ 

**15.** Do you think that the manuscript requires its English grammar, punctuation or spelling to be corrected? Yes

### Evaluation

Excellent manuscript.

CCFs are uncommon vascular lesion related to head injury. Knowledge of complex angioarchitecture and multiple pathways of access is crucial for the correct treatment as its management. Techniques and methods of treatment are: coils, GBs or liquid embolic; each technique has its advantages and disadvantages, therefore knowledge of the methods are essential for the treatment scheme and for choosing the approach. There may be no single standard endovascular procedure for CCF therapy.

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Regardless of the duration of the symptoms, the patient will undergo endovascular care on request and excellent results should be obtained. Coils are better compared solid embolic agents used in high flow endovascular fistula procedure. As we successfully occlude the fistula In 2 patients without any complications which was experienced by the patients. DBs become treatment choices as this method can reduce the flow of CCF and give good outcome in our experiences. Endovascular procedures are rapidly expanding the range of treatment options for cerebrovascular diseases. However, rigorous assessment and understanding of these procedures is necessary to ensure safe, effective, and appropriate use.

# **Responses to Reviewers' Comments**

### ETHICAL CORRECTIONS:

1. Please confirm in the revised manuscript that the patients in the figures (or patient parent/legal guardian) provided informed consent for the images to be published. 2. As this does not meet the scope of a Case Series, please confirm in the response letter that we can change the article type to Original Research.

### **Author response**

- 1. Thank you for this observation. All Editor comment was admitted and correction was done.
- 2. We are agree to change the article type to Original Research.

### **REVIEWER 1 EVALUATION**

1. the conclusion should be rewritten.

I disagree with the conlusion: the coiling procedure for occluding the CCF is a strongly effective and secure treatment for traumatic CCF. A considerable and permanent change in clinical signs and symptoms can be observed in most patients. The CCF treatment is different in many coutries and available meterials. Such in a Vietnam study, the balloon is the main option, the prognosis is good. The authors were honorable.

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2. the results should be classified accroding the approaches, such as transarterial, venous, et al..

3. please provide more clear images and reorgnized then in software.

the figures should be reorgnized in photoshop, graphpad, or ppt.

figure 6 and 7 are not clear, the orginal image should be provided, not the imaging from the computer screen by phone.

### Author response

Thank you for this observation.

- 1. As reviewer suggested, we revised the conclusion of our study.
- 2. The Result was separated between trans arterial and transvenous.
- 3. We revised figure 6 and delete figure 7 due to lack of quality of my picture.

REVIEWER 1 EVALUATION

5. If relevant, are the methods clear and replicable?

NA. the method should be classified according the treatment options, such as TAE, TVE, or these two combinations.

### **Author response**

Thank you for this observation.

As reviewer suggested, we revised the method of our study, adding the treatment approach

description.

11. Do the conclusions correlate to the results found?

No. I suggest the authors rewrite the conclusion.

### Author response

Thank you for this observation.

### **ETHICAL CORRECTIONS:**

1. Please confirm in the revised manuscript that the patients in the figures (or patient parent/legal guardian) provided informed consent for the images to be published. 2. As this does not meet the scope of a Case Series, please confirm in the response letter that we can change the article type to Original Research.

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### As reviewer suggested, we rewrite the conclusion of our study.

### **REVIEWER 2 EVALUATION**

#### Excellent manuscript.

CCFs are uncommon vascular lesion related to head injury. Knowledge of complex angioarchitecture and multiple pathways of access is crucial for the correct treatment as its management. Techniques and methods of treatment are: coils, GBs or liquid embolic; each technique has its advantages and disadvantages, therefore knowledge of the methods are essential for the treatment scheme and for choosing the approach. There may be no single standard endovascular procedure for CCF therapy.

Regardless of the duration of the symptoms, the patient will undergo endovascular care on request and excellent results should be obtained. Coils are better compared solid embolic agents used in high flow endovascular fistula procedure. As we successfully occlude the fistula In 2 patients without any complications which was experienced by the patients. DBs become treatment choices as this method can reduce the flow of CCF and give good outcome in our experiences. Endovascular procedures are rapidly expanding the range of treatment options for cerebrovascular diseases. However, rigorous assessment and understanding of these procedures is necessary to ensure safe, effective, and appropriate use.

### Author response

Thank you for this observation. As reviewer suggested, we revised the conclusion of our study.

From: Georgia Watson georgiawatson@dovepress.com

Subject: Your revised files have been successfully submitted [273603]

Date: 13 August 2020 17.15

To: Dr Thohar Arifin thohar@fk.undip.ac.id

Dear Dr Thohar Arifin,

Thank you for submitting your revised manuscript and additional files to International Journal of General Medicine. These have been uploaded successfully. We will begin processing the submission in the next few days, and will be in contact with an update once we have performed our Editorial Checks.

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Regards, Georgia Watson Revised Manuscript Co-ordinator georgiawatson@dovepress.com Dove Medical Press Ltd 273603

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From: Ms Sandi Mclver sandi@dovepress.com

Subject: Dove Medical Press: Submission accepted for publication

Date: 18 August 2020 08.16

To: Dr Thohar Arifin thohar@fk.undip.ac.id

Dear Dr Thohar Arifin,

I am pleased to inform you that the submission, "Neuro-endovascular Intervention in Traumatic Carotico-Cavernous Fistulae (CCF): A Single-Center Experience", has been accepted for publication in "International Journal of General Medicine". The article publishing charge is now payable before the paper can be progressed any further and an invoice is accessible here: https://www.dovepress.com/invoice.php?i\_key=y1PplwTV5peOWaT32xKoXWfW44150 (If you require any amendments to your invoice please reply to this email. Please note invoices cannot be amended once a payment has been made)

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Yours sincerely

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MUHAMAD THOHAR ARIFIN <thohar@fk.undip.ac.id>

# A PDF of your manuscript [Dove Medical Press 7d - ID 273603]

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**Ms Boon Lee** <boonlee@dovepress.com> Kepada: Dr Thohar Arifin <thohar@fk.undip.ac.id> 21 Oktober 2020 03.51

Dear Dr Thohar Arifin

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Yours sincerely

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