

Title: Arterial Presumed Perinatal Ischemic Stroke: A Mini Review and Case Report of Cognitive and Speech-Language Profile in a 5-Year-Old Girl

Children

Dear Reviewer,

Please find enclosed the Review Report of our manuscript entitled "**Arterial Presumed Perinatal Ischemic Stroke: A Mini Review and Case Report of Cognitive and Speech-Language Profile in a 5-Year-Old Girl**"

Thank you for recognizing the significance of research and practical issues concerning the cognitive, speech, and language profiles of children who have experienced a perinatal stroke. This knowledge might be particularly useful in the field of speech-language pathology and the overall rehabilitation of affected children.

We are very grateful for your extremely valuable comments: we have modified the paper according to your suggestions.

We sincerely hope that the revised version of the manuscript would receive a positive further review and that it would be accepted for the publication in the **Children**.

Thank you very much,
Sincerely,

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RESPONSE FOR REVIEWER 1:

1. *This case report provides a comprehensive overview of the patient's medical history, diagnosis, and outcomes. The organization is generally clear, with distinct sections covering different aspects such as cognitive profile, speech and language profile, and results. The detailed medical history and diagnostic process are well-presented. However, it would be helpful to provide a brief summary or conclusion at the end of the medical history section to highlight key points for readers.*

Thank you very much for the well pointed comment. We added a brief summary at the end of the medical history, so the readers can easily understand key points.

Please see **Case presentation** section, the following text in the **Case presentation section** (Line 245-248)

“In the summary, the girl’s psychophysiological profile indicates that she experienced delayed psychomotor development, delayed speech-language development, and USCP after suffering a massive unilateral cortical-subcortical ischemic stroke prenatally, which primarily affected the left MCA territory.”

2. *The discussion provides a valuable interpretation of the results in the context of existing literature. It effectively addresses the uniqueness of the case and potential implications for understanding cognitive and speech-language development after perinatal stroke. However, a clearer link between the results and the existing literature would enhance the discussion.*

Thank You for your comment. We organized the discussion into two sections: 3.1. Cognitive profile and 3.2. Speech-language profile of the girl with APPIS. Considering that there is not much research regarding APPIS and the speech-language and cognitive profile, we discussed a part of our findings in relation to perinatal strokes in general.

Please, suggest to us if additional clarification is needed.

3. *The conclusion succinctly summarizes the key findings and emphasizes the need for additional research. Consider reinforcing the practical implications of the study and potential recommendations for clinicians or researchers working with similar cases.*

Thank you very much for your suggestion. We reinforce the practical implication of the study and recommendations for both clinicians and researchers working with children who have perinatal stroke.

Concerning your suggestions, we have added these important issues in the section **Conclusions**.

Please see **Conslusions**, the following text in the **Conclusions** (Line 514-518):

“Besides, it becomes apparent that a multidisciplinary or even interdisciplinary research approach is crucial if we want to better understand causes and consequences on the child's overall development. Also, early and comprehensive diagnostics followed by a targeted individual therapeutic model of work are a prerequisite for achieving optimal results in children with developmental difficulties caused by APPIS.”

4. *The language used is generally formal and scientific, appropriate for a case report. However, ensure consistency in terminology and consider defining abbreviations upon first use. Additionally, in some parts, sentences are quite lengthy, and breaking them down for better readability could enhance the overall flow.*

Thank you very much for the well pointed comment. We apologize for this omission. We carefully revised paper and correct all the inconsistencies regarding terminology. Also, we tried to brake some sentences down in order to provide better understanding and readability.

5. ***While the case report mentions the need for additional studies, providing specific recommendations or hypotheses for future research would strengthen this paper.***

Thank you for your suggestion. We highlighted how important it is to use a multidisciplinary approach when conducting research on this subject. We included this in the conclusion within the recommendations.

Please see **Conslusions**, the following text in the **Conclusions** (Line 514-518):

“Besides, it becomes apparent that a multidisciplinary or even interdisciplinary research approach is crucial if we want to better understand causes and consequences on the child's overall development. Also, early and comprehensive diagnostics followed by a targeted individual therapeutic model of work are a prerequisite for achieving optimal results in children with developmental difficulties caused by APPIS.”

6. ***The ethical aspects of the study, such as informed consent and adherence to ethical principles, are briefly mentioned. Consider expanding on ethical considerations, particularly concerning the involvement of a pediatric patient, to assure readers of the study's ethical integrity.***

Thank you very much for your valuable suggestion. We expanded the ethical consideration concerning the involvement of a pediatric patient, with aim to assure readers of the study's ethical integrity.

Please see **Case presentation** section, the following text in the **Case presentation section** (Line 284-287)

„Humane and compassionate care was provided to the child. In the context of family relationships and actual research, it was negotiated with the parents with the intention of sharing knowledge of the patient's medical and psychosocial needs and interests.”

7. ***The case report provides valuable insights into the cognitive and speech-language outcomes of a child with arterial presumed perinatal ischemic stroke. Addressing the aforementioned points would further enhance the clarity and impact of the report.***

Thank you very much for your valuable comments. We tried to address all of them and in that way enhance the clarity and the impact of this case report.