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OPEN PEER REVIEW

Evaluation of Ethanol Injection, Radiofrequency Ablation, and Levothyroxine Therapy in the Management of Benign Thyroid Nodules

Alireza Arefzadeh, Hossein Ghanaati, Mahsa Alborzi Avanaki, Alireza Abrishami, Amir Hossein Jalali, Hamidreza Hosseinpour

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

5 comments · 6 Mar 2021 – 7 Jun 2021

Mohammad Reza Babaei Reviewer — MINOR REVISION — 6 Mar 2021

Hi
1-Also, RF ablation is more expensive, but alcohol injection is riskier and has more complications. Please inform us about the complications you encountered with alcohol injection.
2-Please send some sonographic pictures of your patients before and after treatment.

mohammad momeni Reviewer — MAJOR REVISION — 12 Mar 2021

Dear authors:
This is valuable clinical research. However, it's not acceptable in the current format and needs a major revision, especially the English writing in the manuscript.
-In the abstract, the Conclusion should be based on the results, but there is no clear relationship between these two parts in your manuscript. For example, there are no data about the cost in your results.
- Please use abbreviations after writing out the full form at first use in the manuscript.
-In the method section, please explain why you performed FNA twice only for the RFA group.
-Lines 89-90 are unnecessary in the manuscript; please omit them.
-In the method section, please add the name of the software used for nodule volume estimation.
-There are no figures. Please add some photos for a better understanding of the procedures.

Referee 1 Reviewer — MAJOR REVISION — 6 Jun 2021

1-Please spell out abbreviations at their first occurrence in the abstract and main paper.
2-In line 22, months should refer to the time after intervention. Please consult with an English editor. Many words should be changed for a better writing style.
3-What is the meaning of "dynamic treatments"?
4-If the study is a clinical trial, did the authors register the study in a trial registry? Please add the registration number to the paper.
5-This part is unclear: "benign solid thyroid nodules confirmed with FNA under ultrasound and a repeat FNA for benign nodules undergo radiofrequency ablation". If the nodules have been confirmed by FNA, why did the authors mention radiofrequency ablation? RFA is only one of the treatment arms, and patients in the ethanol and hormone therapy arms should not receive RFA. In addition, did the authors perform repeat FNA for all patients?
6-Why is a normal calcitonin level an inclusion criterion?
7-The authors mentioned the following exclusion criterion: "history of previous treatments related to thyroid nodules." Does this mean any treatment? For example, hormonal therapy?
8-What is the meaning of "fixed" in lines 76 and 79? Does it mean "determined"?
9-What was the method of determining the volume of the nodules?
10-How many radiologists determined nodule volume? What was their interrater and intrarater reliability?
11-What was the randomization method? Block randomization?
12-Who performed RFA and ethanol injection? An endocrinologist or an interventionist?
13-What is the meaning of transistmic?

14-How did the authors control the RFA process? With live and concurrent sonography?
15-Did the authors adjust the time and current of RFA and the volume of ethanol injected into the nodule based on nodule volume and echotexture?
16-The study is single-blind. Who is blinded in the study? Definitely, the patient is not blinded.
17-As there are 3 groups, comparison should be done using ANOVA. Why did they use a t-test?
18-The authors mentioned: " In the ethanol injection group, the mean volume reduction at the baseline of the study, 1, 3,. . .. . .". The mean percentage volume reduction at baseline is meaningless. [This question could be proposed for other methods.]
19-How did the authors assess the relationship between age, BMI, and gender and the percentage volume reduction?
20-Did the authors assess and compare the baseline characteristics and demographic data of the three groups? [age, gender, nodule volume, ...] They should compare the baseline data of the three groups and add p-values.
21-It would be better if the authors added some photos to the paper.
22-The authors should compare the volume reduction between the three methods at similar time points and add p-values for these comparisons.
23-Statistical analyses should be completed. They are not sufficient.
24-Please explain briefly what the reasons for nodule treatment were in the three groups.
25-Please report the paper based on the CONSORT guideline.

Associate Editor

MAJOR REVISION 7 Jun 2021

Dear editorial
Regarding the manuscript entitled "Evaluation of Ethanol Injection, Radiofrequency Ablation, and Levothyroxine Therapy in the management of Benign Thyroid Nodules":
Manuscript ID: 114004
The reviewers commented as follows:

Reviewer #1:

1-Please give the full terms for abbreviations at their first occurrence in the abstract and main paper.
2-In line 22, months should refer to the time after intervention. Please consult with an English editor. Many words should be changed for a better writing style.
3-What is the meaning of "dynamic treatments"?
4-If the study is a clinical trial, did the authors register the study in a trial registry? Please add the registration number to the paper.
5-This part is unclear: "benign solid thyroid nodules confirmed with FNA under ultrasound and a repeat FNA for benign nodules undergo radiofrequency ablation". If the nodules have been confirmed by FNA, why did the authors mention radiofrequency ablation? RFA is only one of the treatment arms, and patients in the ethanol and hormone therapy groups should not receive RFA. In addition, did the authors perform repeat FNA for all patients?
6-Why is normal calcitonin an inclusion criterion?
7-The authors mentioned the following exclusion criterion: "history of previous treatments related to thyroid nodules." Does this mean any treatment? For example, hormonal therapy?
8-What is the meaning of "fixed" in lines 76 and 79? Does it mean "determined"?
9-What was the method of determining the volume of the nodules?
10-How many radiologists determined nodule volume? What was their interrater and intrarater reliability?
11-What was the randomization method? Block randomization?

12-Who performed RFA and ethanol injection? An endocrinologist or an interventionist?
13-What is the meaning of transistmic?
14-How did the authors control the RFA process? With live and concurrent sonography?
15-Did the authors adjust the time and current of RFA and the volume of ethanol injected into the nodule based on nodule volume and echotexture?
16-The study is single-blind. Who is blinded in the study? Definitely, the patient is not blinded.
17-As there are 3 groups, comparison should be done by ANOVA. Why did they use a t-test?
18-The authors mentioned: " In the ethanol injection group, the mean volume reduction at the baseline of the study, 1, 3,. . .. . ." The mean percentage volume reduction at baseline is meaningless. [This question could be proposed for other methods.]
19-How did the authors assess the relationship of age, BMI, and gender with the percentage volume reduction?
20-Did the authors assess and compare the baseline characteristics and demographic data of the three groups? [age, gender, nodule volume, ...] They should compare the baseline data of the three groups and add p-values.
21-It would be better if the authors added some photos to the paper.
22-The authors should compare the volume reduction between the three methods at similar time points and add p-values for these comparisons.
23-Statistical analyses should be completed. They are not enough.
24-Please explain briefly what the reasons for nodule treatment were in the three groups.
25-Please report the paper based on the CONSORT guideline.

Reviewer #2:
This is valuable clinical research. However, it's not acceptable in the current format and needs a major revision, especially the English writing in the manuscript.
-In the abstract, the Conclusion should be based on the results, but there is no clear relationship between these two parts in your manuscript. For example, there are no data about the cost in your results.
- Please use abbreviations after writing the full form at the first occurrence in the manuscript.
-In the method section, please explain why you performed FNA twice only for the RFA group.
-Lines 89-90 are unnecessary in the manuscript; please omit them.
-In the method section, please add the name of the software used for nodule volume estimation.
-There is no figure. Please add some photos for a better understanding of the procedures.
Reviewer #3:

1-Also, RF ablation is more expensive, but alcohol injection is riskier and has more complications. Please inform us about your complications with alcohol injection.
2-Please send some sonographic pictures of your patient before and after treatment.

Editor-in-Chief

MAJOR REVISION 7 Jun 2021

Dear authors,
Your article needs Major Revision.
Regards

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Editorial office,

Thanks for reaching out to us regarding the manuscript entitled "Evaluation of Ethanol Injection, Radiofrequency Ablation, and Levothyroxine Therapy in the management of Benign Thyroid Nodules" with manuscript ID "114004". Our team has read the reviewers' comments and revised the manuscript precisely according to the authors' gridline. Herewith, we provided the authors' response to each comment right after each statement. It is worth mentioning that the ethics committee of Tehran University of Medical Sciences approved this study (IR TUMS.IKHC.REC.1400.248). Please feel free to contact us if you need further information

Best regards,
Sincerely,

Reviewer #1:
1-please add full term of abbreviations for the first time in abstract and main paper in the first time.

Authors' response: The manuscript has been revised accordingly.

2-in line 22, months should be time after intervention. Please consult with an English editor. Many words should be changed for a better writing style.

Authors' response: Thank you for your comment. The whole manuscript has been revised properly regarding English style and academic writing**.** The mentioned line is corrected as follows: "There was a significant relationship between mean volume reduction and months following intervention (1, 3, and six)"

3-what is the meaning of "dynamic treatments"?

Authors' response: This term has changed to "various" accordingly: **"**various treatments are suggested for suspected thyroid nodules.**"**

4-this part is unclear: "benign solid thyroid nodules confirmed with FNA under ultrasound

and a repeat FNA for benign nodules undergo radiofrequency ablation" if the nodules have been confirmed by FNA, why did the authors mention radiofrequency ablation? RFA is only one of treatment arms and patients in ethanol and hormone therapy should not receive RFA. In addition, did the authors perform repeat FNA for all patients?

Authors' response: This part has been revised as follows:

"FNA confirmed the benignity of the Thyroid Nodules in all three groups under ultrasound guidance, but according to European Thyroid Association Guidelines 2020, a repeat FNA of benign thyroid nodules was performed only for the radiofrequency ablation group. (https://pubmed.ncbi.nlm.nih.gov/32903999/). "

5-why normal calcitonin is inclusion criteria?

Authors' response: serum calcitonin is a marker used for confirming/recurrence of medullary thyroid carcinoma. Therefore, patients with normal calcitonin levels were included.

6-the authors mentioned following exclusion criteria: "history of previous treatments related to thyroid nodules." Does this mean any treatment? For example, hormonal therapy?

Authors' response: this means history of any treatments including radiorequency ablation, hormonal therapy or ethanol injection therapy.

7-what is the meaning of "fixed" in lines 76 and 79? Does it mean "determined"?

Authors' response: Certainly, in other words, the serum TSH (or other mentioned hormones) level was within the normal range measurable with laboratory kits. The word "fixed" was changed to "determined" in main text.

8-what was the method of determining the volume of nodules?

Authors' response: Based on ultrasonography measurements of nodules, three semi-axes were measured and nodule volume was calculated through Ellipsoid volume calculator in SPSS 25 software (Ellipsoid Formula: $V= 4/3 \times \pi \times$ anteroposterior size $\times$ transvers size $\times$ non-axial view size).

9-how many radiologists determined nodule volume? What was their interrater and intrarater reliability?

Authors' response: One radiologist has determined the volume of all nodules with one device and following, all the cases were treated and followed up with mentioned device**;** based on ultrasonography measurements of nodules, three semi-axes were measured, and nodule volume was calculated through Ellipsoid volume calculator software. this part has added to the manuscript accordingly.

10-what was the randomization method? Block randomization?

Authors' response: the randomization method was block randomization with groups of six, and it was added to the method section of the manuscript.

11-who did perform RFA and ethanol injection? Endocrinologist or interventionist?

Authors' response: Our interventionist performed RFA and ethanol injection with one device (one interventionist performed all procedures with one device), and this part has added to the manuscript accordingly.

12-what is the meaning of transistmic?

Authors' response: Thank you for mentioning this point. Transistmic is a method in away that the needle is inserted through the isthmus in order to visualize the entire length of the electrode and the target nodule **(** https://www.researchgate.net/figure/Schema-of-the-transisthmic-approach-and-the-moving-shot-technique-The-needle-is-inserted_fig1_232974701 **)** , however this part was omitted to avoid misunderstandings.

13-how did the authors control the RFA process? With live and concurrent sonography?

Authors' response: Ablation current started from 50W and elevated 10W/min till the appearance of the transient echogenic area in sonography (This part was mentioned in the paper)

14-did the author adjust the time and current of RFA and volume of ethanol injected in nodule based on nodule volume and echotexture?

Authors' response: The author adjust the time and current of RFA and volume of ethanol injected in nodule based on nodule volume**,** for example it is recommended that total retention amount of injected ethanol not to exceed 1 mL, even for large-sized nodules (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6424836/) or about 30% of the nodule volume.

15-the study is single blind. Who is blind in the study? Definitely the patient is not blinded.

Authors' response: The radiologist assessed the size of the nodules 1, 3, and 6 months after the intervention was blind. It is mentioned in the manuscript accordingly.

16-as the groups are 3, the comparison should be done by ANOVA. Why did they use t-test?

Authors' response:

We corrected the analysis based on the reviewer’s comment.

17-the authors mentioned: "In the ethanol injection group, the mean volume reduction at the baseline of the study, 1, 3,……" mean volume reduction percent for baseline is meaningless. [this question could be proposed for other methods]

Authors' response:

We have deleted the baseline data from the paper.

18-how did authors assess relationship between age, BMi and gender with percent of volume reduction?

Authors' response:

Corrections have been made in paper.

19-did the authors assess and compare the baseline characteristic and demographic data of three groups? [age, gender, nodule volume, …..] they should compare baseline data of three groups and add P-Values.

Authors' response:

The data of percent of volume reduction is important and we have made it in the paper.

20-it is better if the authors add some photos to paper.

Authors' response:

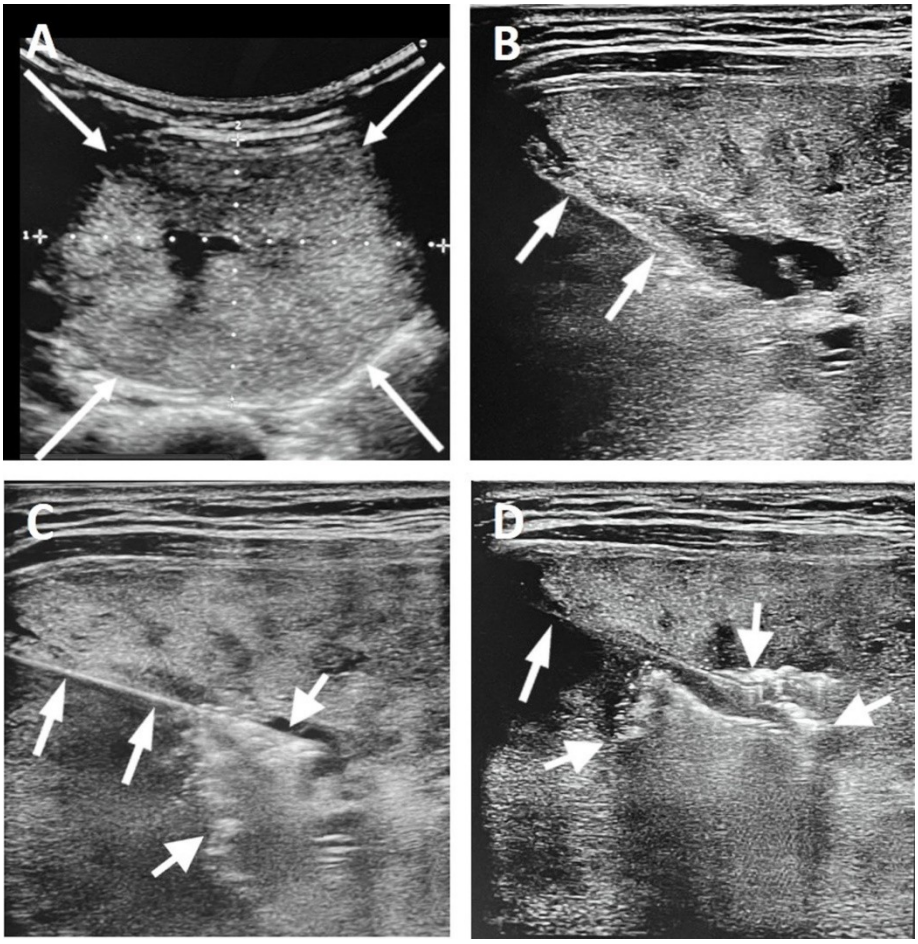


Figure 1: (A) Ultrasonography (US) image shows a large benign thyroid nodule in right lobe (*thin arrow*), (B) Transverse US image shows the RF probe (*short arrow*) was inserted into the middle of the nodule. (C) After one minute of ablation air bubbles (thick arrow) appear in centeral part of nodule and (D) increased after 3 minutes.

21-the authors should compare the volume reduction between three methods in similar time points and add P-Values for these comparisons.

Authors' response: It has been done

22-statistical analyses should be completed. They are not enough.

Authors' response:

We have completed those section.

Comparison of nodule volumes in three groups was investigated using the ANOVA and pairwise comparisons were done by post-hoc test. Also, the comparison of before and after intervention for each group was investigated using repeated measure ANOVA. Differences with $p < 0.05$ were considered statistically significant.

23-please explain in brief what were the reason of nodule treatment in three groups?

Authors' response: neck bulging (cosmetic) was the most important reason for intervention in this study, and it is added to the paper.

24-please report the paper based on CONSORT guideline.

Authors' response:

We have written the paper based on CONSORT

Reviewer #2:
This is a valuable clinical research. However, it's not acceptable in the current format and needs a major revision especially the manuscript English writing.

Authors' response: Thank you for your valuable comments. The whole manuscript has been revised regarding the English style and academic writing.

-In the abstract, the Conclusion should be based on results, but there is no good relation between these two parts in your manuscript, for example, there is no data about the cost in your results.

Authors' response:

Thank you for your comment, we omitted the cost section from the abstract conclusion and this part has been revised as follows: "Radiofrequency ablation therapy is the best modality for managing benign thyroid nodules in our study, however perithyroidal hemorrhage, recurrent nerve damage, and skin burns are some of the minor complication of RF which recovered spontaneously, no complication was observed among our patients." However, in our study, as in other studies, the costs related to radiofrequency ablation were higher than other methods due to more expensive equipment.

- Please use abbreviations after writing the full form in the first place used in the manuscript.

Authors' response: The manuscript has been revised accordingly**.**

-In the method section, please explain why you performed two times FNA just for RFA group?

Authors' response: This part is added to the manuscript accordingly, according to European Thyroid Association Guidelines 2020, a repeat FNA of benign thyroid nodules was performed only for radiofrequency ablation group.
(https://pubmed.ncbi.nlm.nih.gov/32903999/)

-There is no necessity for lines 89-90 in the manuscript. Please omit them.

Authors' response: These two Lines were omitted

-In the method section, please add the name of the software that used for nodule volume estimation.

Authors' response: Thank you regarding the mentioning of this point. We revised this part as follows: Based on ultrasonography measurements of nodules, three semi-axes were measured and nodule volume was calculated through Ellipsoid volume calculator in SPSS 25 software (Ellipsoid Formula: V= 4/3 ×π × anteroposterior size × transvers size × non-axial view size).

-There is no figure.please add some photos for a better understanding of the procedures.

Authors' response:

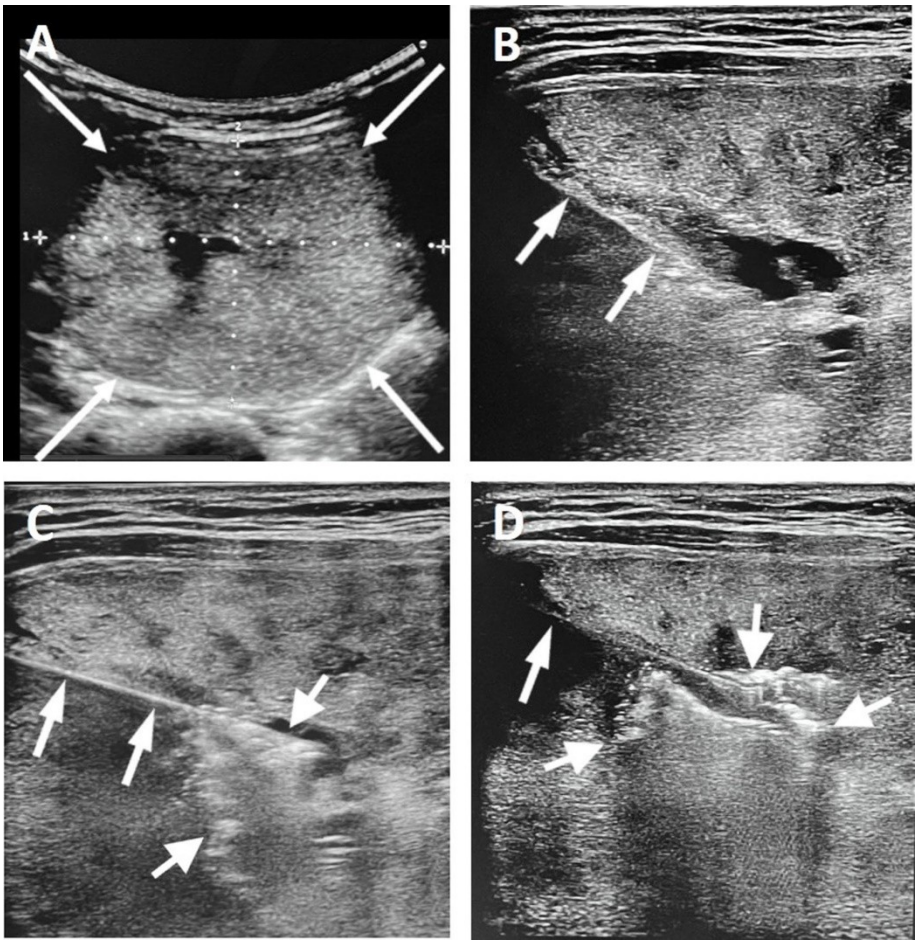


Figure 1: (A) Ultrasonography (US) image shows a large benign thyroid nodule in right lobe (*thin arrow*), (B) Transverse US image shows the RF probe (*short arrow*) was inserted into the middle of the nodule. (C) After one minute of ablation air bubbles (thick arrow) appear in centeral part of nodule and (D) increased after 3 minutes.

Reviewer #3:
1-Also the RF ablation is more expensive but alcohol injection is more risky and has more complication. Please inform us about your complications in alcohol injection.

Authors' response: We revised this part as follows:

“Although there are some complications following percutaneous ethanol injection caused by ethanol leakage into the adjacent structures including local pain, dysphonia, and significant complication such as recurrent nerve palsy and necrosis of the larynx and skin, Fortunately,

none of these complications were observed in the current study."
(https://pubmed.ncbi.nlm.nih.gov/9697961/)

2-please send some sonographic picture of your patient's before and after treatment

Authors' response:

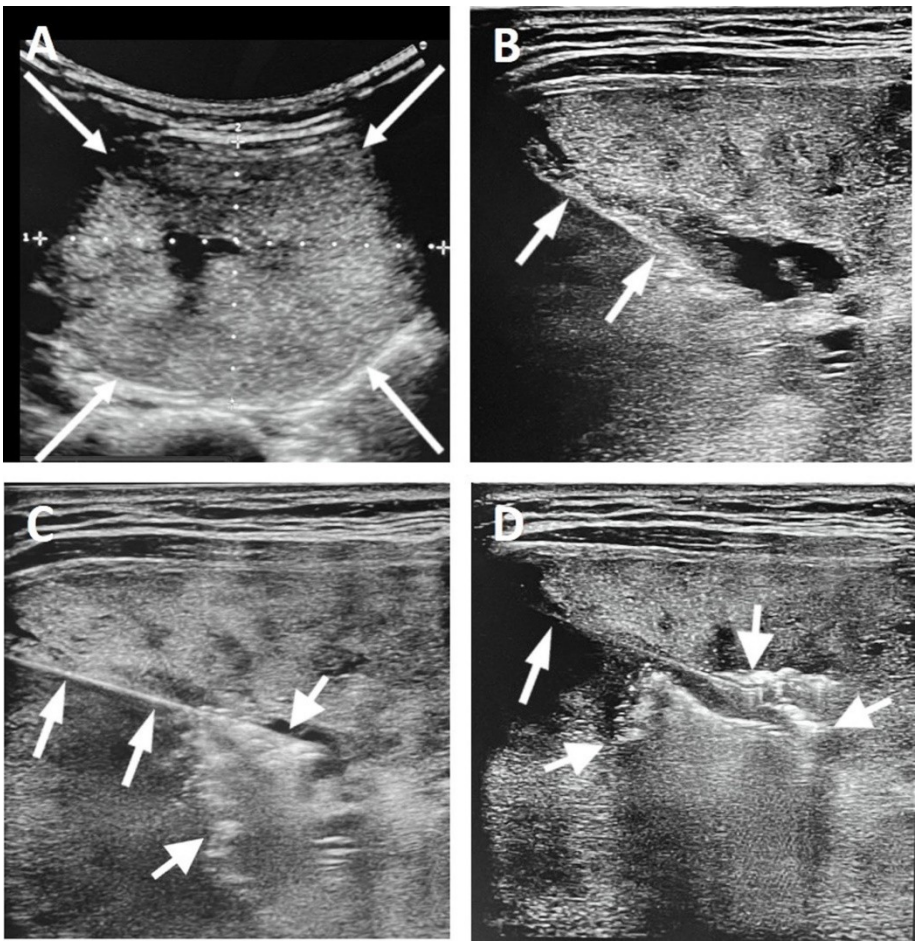


Figure 1: (A) Ultrasonography (US) image shows a large benign thyroid nodule in right lobe (*thin arrow*), (B) Transverse US image shows the RF probe (*short arrow*) was inserted into the middle of the nodule. (C) After one minute of ablation air bubbles (thick arrow) appear in centeral part of nodule and (D) increased after 3 minutes.

2 Revision 1

2 comments · 21 Nov 2021 – 22 Nov 2021

Associate Editor

MINOR REVISION 21 Nov 2021

114004'
1-In line 9, please change "volume decline" to "volume decrease of benign thyroid nodules after radiofrequency ...." And delete benign thyroid nodules at the end of the sentence accordingly.
2-Please add the full terms for abbreviations at their first use in the abstract and the paper separately. For example, LT4 in line 16.
3-This part is unclear in the abstract. Please clarify: (each of 30 and 31 patients in RF group).
4-Please add the p-value after the word "respectively" in line 22.
5-Please change "months following" to "follow up duration" in lines 22 and 23.
6-This part seems to belong to the results section: "however perithyroidal hemorrhage, recurrent nerve damage, and skin burns are some of the minor complication of RF which recovered spontaneously, no complication was observed among our patients." We can mention this part in the results of the abstract and add something like this in the conclusion of the abstract: "...for managing benign thyroid nodules in our study and its complications resolve spontaneously without a major adverse effect for the patient."
7-Please add sequential numbers to titles and subtitles.
8-Please correct this part: "which are diagnosed incidentally while imaging neck structures are for other reasons," to: "which are diagnosed incidentally during neck imaging due to the other reasons,"
9-Please replace the word size in lines 89 and 90 with diameter [in the ellipsoid formula].
10-Please correct "patientsat" in line 144 to "patients at".
11-Please add manufacturer information for SPSS ver 25 [based on the IBM site].
12-Please correct the text in line 137: "..... Years, respectively [P-Value=0.03]."
13-In lines 155 and 156, there are two instances of "but". Please correct the sentence.
14-Please add this part in line 141: "Mean volume reduction percent of patients treated with RF and ethanol injection were statistically higher than LT4 treated patients in first, third and sixth months. In addition, in months 1 and 3, the mean volume reduction in RF method were higher than ethanol injection. In addition, in RF and ethanol injection groups, the mean volume reduction percent in 6 months were higher than months 3 and 1 and the value of third month were higher than first month [Table 1]".
15-In line 199, please correct "l-T4suppressive" to "LT4 suppressive".
16-What is the meaning of "non-inferior" in line 207?
17-Please delete the title Conclusions and add the phrase in conclusion at the beginning of the paragraph.
18-This part in the conclusion has not been mentioned in the results section: "Besides, no complication was observed among our patients."
19-Please correct the reference formats according to the journal guidelines. For example, journal names should be abbreviated.

Editor-in-Chief

MINOR REVISION 22 Nov 2021

Dear authors,
Your article needs Minor Revision.
Regards

3

Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Editorial office,

Thanks for reaching out to us regarding the manuscript entitled "Evaluation of Ethanol Injection, Radiofrequency Ablation, and Levothyroxine Therapy in the management of Benign Thyroid Nodules" with manuscript ID "114004". Our team has read the reviewers' comments and revised the manuscript precisely according to the authors' gridline. Herewith, we provided the authors' response to each comment right after each statement. Please feel free to contact us if you need further information.

Best regards,
Sincerely

Second revision response:

1-in line 9, please change “volume decline” to “volume decrease of benign thyroid nodules after radiofrequency ….” And delete benign throid nodules at the end of sentence accordingly.
Author Response: Thank you for your comment, the sentence has been modified as requested in the main text

2-please add full term of abbreviations in the first usage in abstract and paper separately. For example, LT4 in line 16.
Author Response: thank you for your comment, the full term abbreviations in the first usage were added to abstract and main text accordingly.

3-this part is unclear in abstract. Please clarify: (each of 30 and 31 patients in RF group).
Author Response:
This part was modified as follows; " Patients who had met the inclusion criteria were selected and randomly allocated into three groups of a single session of RF ablation (Group 1, thirty-one cases), a single session of ethanol injection (Group 2, thirty cases), or a 6-month LT4 treatment (Group 3, thirty cases).

4-please add p-value after the word “respectively” in line 22.
Author Response: p-value was added to the article; "The mean volume reduction after 6 months of intervention for ethanol injection group, RF ablation group, and LT4 treatment group were 73.6%, 80.1%, and 8.7%, respectively (P<0.001)."

5-please change “months following” to “follow up duration” in lines 22 and 23.
Author Response: thank you for your comment, the sentence was modified as requested in the main text

6-this part seems to belong to result section: “however perithyroidal hemorrhage, recurrent nerve damage, and skin burns are some of the minor complication of RF which recovered spontaneously, no complication was observed among our patients.” We can mention this part in result of abstract and add something like this in conclusion of abstract: “…for managing benign thyroid nodules in our study and its complications resolve spontaneously without a major adverse effect for the patient.”
Author Response: thank you for your comment, this part has been revised as follows:

Radiofrequency ablation therapy was the best modality for managing benign thyroid nodules in

our study, since it was associated with the highest mean volume reduction while the lowest mean volume reduction was seen in the LT4 treatment group during six months of follow-up.

7-please add sequential numbers to titles and sub-titles.
Author Response:Thank you for your comment. Sequential numbers were added to titles and sub-titles accordingly.

8-please correct this part: “which are diagnosed incidentally while imaging neck structures are for other reasons,” to: “which are diagnosed incidentally during neck imaging due to the other reasons,”
Author Response: This part has been revised accordingly

9-please replace the word size in lines 89 and 90 by diameter [in ellipsoid formula].
Author Response: This word has been revised accordingly

10-please correct “patientsat” in line 144 to “patients at”
Author Response: This word has been revised accordingly in line 113.

11-please add manufacturer data of SPSS ver 25 [based on IBM site]
Author Response: Thank you for your comment, related data were added as follows; (IBM Crop.Released 2017.IBM SPSS Statistics for Windows, Version 25.0. Armonk, NY: IBM Crop)

12-please correct in line 137: “…. Years, respectively [P-Value=0.03].”
Author Response: This word has been added accordingly

13-in lines 155 and 156 there are two “but”. Please correct the sentence.
Author Response: This word has been omitted.

14-please add this part in line 141: “Mean volume reduction percent of patients treated with RF and ethanol injection were statistically higher than LT4 treated patients in first, third and sixth months. In addition, in months 1 and 3, the mean volume reduction in RF method were higher than ethanol injection. In addition, in RF and ethanol injection groups, the mean volume reduction percent in 6 months were higher than months 3 and 1 and the value of third month were higher than first month [Table 1]”
Author Response: Thank you for your comment, this part has been added to the main text.

15-in line 199, please correct “l-T4suppressive” to “LT4 suppressive”.
Author Response: This word has been corrected.

16-what is the meaning of “non-inferior” in line 207?
Author Response: this part has been revised as follows: they concluded that both PEI and RF ablation were helpful and safe treatment modalities and the mean volume reduction of the PEA group was higher than RF ablation group.

17-please delete title Conclusions and add in conclusion at the beginning of the paragraph.
Author Response: conclusion title has been omitted and this part has been revised accordingly .

18-this part in conclusion has not been mentioned in result section; “Besides, no complication was observed among our patients.”
Author Response: thank you for your comment, this sentence has been omitted.

19-please correct the reference formats according to journal guidelines. For example, journal names should be abbreviated.

Author Response: **reference style of the journal was downloaded and applied to references.**

3 Revision 2

1 comment · 22 Jan 2022

Editor-in-Chief

ACCEPT 22 Jan 2022

Dear authors,
Your article is acceptable for publication in IJR.
Regards