



**SDI EDITORIAL COMMENTS FORM**

EDITORIAL COMMENT'S on revised paper (if any)	Authors' response to editor's comments
<ol style="list-style-type: none"><li>1. There is no information about the parathyroid glands, only PTH dosage.</li><li>2. What anticoagulant treatment was chosen when vitamin K antagonists were discontinued? The authors do not refer to the possibility of using calcimimetics such as cinacalcet, which are of great importance in reducing PTH and calcemia.</li><li>3. We also stopped VKAs as a factor favoring calciphylaxis and given the increased risk of" is incomplete.</li></ol>	<ol style="list-style-type: none"><li>1. The parathyroid glands were slightly hyperplastic.</li><li>2. The chosen anticoagulant treatment after discontinuation of VKA was apixaban. The patient was also started on cinacalcet upon admission (added to the case report).</li><li>3. We also stopped VKAs as they may contribute to calciphylaxis, and given the increased risk of bleeding associated with rheopheresis.</li></ol>