Comments to the Reviewer A:

1. In the introduction part justification of using propofol instead of thiopentone sodium which is a very popular inducing agent among the anesthetist is not clearly explained. Other than propofol any other inducing agents whether used in similar earlier studies could be mentioned in the intrductory part.

Ans: “*The studies have been conducted on different hypnotic drugs from methohexitone to propofol for the purpose to test the hypothesis of whether preoperative anxiety actually increases the requirement of these hypnotic drugs.4-7 At present Propofol is the most frequently investigated hypnotic drug and have been proved to follow the same hypothesis of higher the anxiety, higher the amount of drug required.5,8 But some recent studies have come with different results.9,10*”

Propofol used as it is the most frequently investigated hypnotic drug at present (reference 5 & 8). Other inducing agents in similar earlier studies also mentioned in reference 4-7.

1. The last paragraph of the Introduction part needs re writing as there is repeatation of words.

Ans: Last paragraph re-writed.

*“We designed this study to address the effect of pre-anesthetic anxiety and heart rate on propofol dose requirement for induction; and the effect of pre-anesthetic anxiety on heart rate. Loss of verbal contact was defined as the end point for induction.”*

1. In the material and method part- the justification of including almost 70% female subject in the study needs clarification. The sex ratio of male and female patients in the study is highly unbalanced. There are studies which has shown the level of anxiety prior to a major operation has a female preponderance so obviously more dose of anesthetic inducing agents will be required to make female subject unconscious.

Ans: There are studies supporting as well as opposing female preponderance of anxiety (reference 22). However, it is added in the limitation of the study.

*“Another aspect was the inclusion of nearly 70% female subjects as study population. There are studies both supporting and opposing female preponderance of pre-operative anxiety.22”*

1. The type of surgery of the patient for which the propofol was administered could be mentioned for the knowledge of the reader.

Ans: Yeah, it could be mentioned. But we thought it was not necessary as it is not directly linked to the study.

1. Process of subject selection~ randomized/ consecutive/ alternative ...etc. not mentioned.

Ans: It was not a randomized comparative study, but a correlation study. 42 subjects meeting inclusion criteria and giving consent were enrolled.

1. Reference(s) for the study tool used in the research work not mentioned. Prior permission for use of the study tool from the appropriate authority whether taken or not as the study tool (STAI S/T) is not available in the public domain and it needs to be purchased. Whether it required translation into vernacular language for correct understanding of the study subject is not clearly stated in the manuscript.

Ans: This study tool is easily available and very much simple. It is already used in several research works related to anxiety (e.g., reference 22). It has also simple language for understanding to the patient.

1. The palpebral reflex (eye blinking after touching the eyelid)to know the depth of anesthesia is considered to be better option than loss of verbal response. Why the second option chosen to assess the patients needs clarification.

Ans: On the contrary, verbal response is better.

Reference:

“[Kim DW](http://www.ncbi.nlm.nih.gov/pubmed/?term=Kim%20DW%5BAuthor%5D&cauthor=true&cauthor_uid=12088804), [Kil HY](http://www.ncbi.nlm.nih.gov/pubmed/?term=Kil%20HY%5BAuthor%5D&cauthor=true&cauthor_uid=12088804) and [White PF](http://www.ncbi.nlm.nih.gov/pubmed/?term=White%20PF%5BAuthor%5D&cauthor=true&cauthor_uid=12088804). Relationship between clinical endpoints for induction of anesthesia and bispectral index and effect-site concentration values. [J Clin Anesth](http://www.ncbi.nlm.nih.gov/pubmed/12088804) 2002; 14(4):241-5.”

1. Referencing is inappropriate and needs to be modified according to Vancouver style.

Ans: Reference is as per AJMS pattern.