Thank you for your comments. I corrected as your comments.

It is desirable to confirm the findings with pathological findings. However, endoscopy was performed after hematemesis and hypotension, and it was not appropriate to perform aggressive histological examination at that time, so we relied on endoscopic and CT findings and clinical diagnosis. In only one case was it possible to repeat the endoscopy once the patient’s condition had stabilized, and even in that case, biopsy findings were not suggestive of ischemia. Postmortem autopsies could not be performed in all cases due to lack of consent.

Although the CT findings of ischemic gastritis are not specific and difficult to diagnose on their own, it is important to note that imaging changes appeared even before the onset of symptoms, indicating that there is room for early intervention.

Blood pressure dropped below 60 in only one case, and in the other cases, even if the patient went into shock, the blood pressure dropped only to the 70-80 range.

Ischemia is thought to be caused by a combination of intestinal and blood flow disorders. Therefore, delayed gastric motility alone does not cause ischemia, and vascular factors such as atherosclerosis of the blood vessels are also important in the development of ischemia. 13,14 are presented as a possible suggestion.

Thank you for your comments. We corrected as your comments.

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