

## ANSWER THE COMMENT

Dear editor

We revised the manuscript as much as possible according your comment. I wish our revision is satisfied your mind even if insufficient. But if you have still comment, please let me know. So I hope that you will consider this paper as suitable publication in your journal. Thank you

Dear reviewer 1

I appreciate for your careful review. Your comment is so good to me.

I answered for your comment followed and we revised the manuscript according your comment

### Major comments

1. Introduction. The authors should finally introduce the present rare case associated with oxaliplatin administration. For example, "However, there has been no report about oxaliplatin- induced APS. We herein report a rare case of APS associated with oxaliplatin administration."

→ we change followed; first case instead of rare case.

→ *Although there have been several recent reports about oxaliplatin-induced sinusoidal injury, this is first case report of a non-tumorous incidental APS following oxaliplatin chemotherapy.*

2. Case report. Initially, when we reviewed the abnormal arterial enhancing lesion, we assumed it might be an arterial portal shunt in the liver. However, this phenomenon strongly indicated a recurred mass in the liver. The authors should explain why the present arterially enhanced mass was strongly suspected as a gastric cancer liver metastasis. Normally, liver metastatic nodule due to gastric cancer seems hypo-density mass.

⇒ I agree your comment, too. I am sorry.

⇒ Actually, we presumed a new hepatocellular carcinoma(HCC) and so we evaluated for the HCC firstly.. However, there was no medical history of viral hepatitis and liver cirrhosis, and only social drinker. Even if there was no liver cirrhosis in CT. Tumor marker of AFP,PIVKA II was also negative, too. So we try to perform biopsy, however, there were no typical mass.

⇒ So we described the more detaied the medical course in manuscript. Please see the changed

the manuscript. Thank you so much.

3. Discussion. As different from oxaliplatin based chemotherapy for colorectal cancer, the present case underwent splenectomy. The authors may be able to discuss about oxaliplatin-induced sinusoidal injury in patient undergoing splenectomy.

→ thank you. That point(splenectomy vs sinusoidal injury) is unprecedented and original idea. so we reviewed the literature, however, we couldn't find the relationship between splenectomy and oxaliplatin-induced sinusoidal injury or APS. splenectomy was rather as option of treatment of hypersplenism from oxaliplatin-induced sinusoidal injury

→I add the content in manuscript. Thank so much for intelligent idea.

Minor comments.

1. Case Report. Although the pathological finding does seem important in this case report, the authors should describe it shortly.

→ we add more detailed contents. Thank you.

2. Figure legend 2. The authors should describe the finding of the Figure 2C and 2D,

3. Figure legend 5. Spelling error. "After adjuvant chemotherapy without oxaliplatin, the arterial enhance lesion disappeared."

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Dear review 2

Thank you for your careful review thank you so much your honorable coment

Dear review 3

Thank you for your careful review

I answered for your comment followed and we revised the manuscript according your comment

1) Title: induced and incidental should not both be used; if the authors wish to use incidental, the title could read: An arteriportal shunt incidental to treatment with oxaliplatin that mimics recurrent (do not use "recurred") gastric cancer

2) On the Title page: Korea must be capitalized.

3) In the Abstract: The first sentence should be the second sentence, and the present second sentence should be the first sentence in this abstract.

In the second paragraph: "in its final stage" would not be proper in the absence of metastatic disease; as I understand this case it could read "malignancy was locally invasive, the patient" (not "patients").

In paragraph 3, take out the sentence starting "Fortunately" which sounds like a game of chance; please consider: "Based on a prior report, the patient was continued on treatment with adjuvant chemotherapy following discontinuation of oxaliplatin."

In the next sentence consider "resolved, supporting the final diagnosis", instead of "disappeared, confirming the final diagnosis".

In the next sentence, consider "a relapse after two years of additional follow up."

Final sentence, consider "recurrent (not "recurred") gastric cancer upon interpretation of multiple imaging modalities".

4) Introduction, line 7: "is caused by" not is cause by.

→ Above all your issue, we revised manuscript according your comment. Thank you.

5) Case Report, line 2: must remove "hugse (sic)" and replace with the tumor size in cm.

→ We revised the 4 cm sized instead of huge sized according to your comment.

At the end of sentence two: consider "gastric cardia" rather than cardiac portion.

⇒ We revised the manuscript.

What is the H. pylori status of this patient?

⇒ We add followed;" CLO test(Campylobacter-like organism test; Rapid urease test) was negative"

Was intestinal metaplasia seen in the gastric biopsies?

→ We add followed Pathologic findings revealed poorly differentiated adenocarcinoma without intestinal metaplasia . thank you

Paragraph 4, line 1: the authors must clearly explain why they have a difference case and the authors should list the reference here for the reviewed prior case report.

→Thank you so much. We revised the followed;

After reviewing literature, we found a few case report of an oxaliplatin-induced liver injury, mimicking a metastatic tumor on an image, although it was a slightly different case(mainly colon cancer and different enhance pattern)<sup>[6-10]</sup>.

→Firstly, main difference were cancer type(gastric cancer vs colon cancer) and enhanced pattern(arterial enhance vs non enhance)

→We list the reference.

6) Discussion, last sentence: unclear why authors state "mimicking an exacerbated gastric cancer on various images". I would suggest using the wording from the revised abstract.

→ We revised according to your comment followed; **To the best of our knowledge, this is the first case report of arterioportal shunt incidental to treatment with oxaliplatin that mimics recurrent gastric cancer upon interpretation of multiple imaging modalities.**

7) Figure 1: can use an Arrow to demonstrate mass location.

8) Figure 2: can use an Arrow to demonstrate mass location. State location of mass; Describe how AB is different from CD.

9) Figure 3: can use an Arrow to demonstrate mass location. State location of mass; Describe how

AB is different from CD.

10) Figure 4: can use an Arrow to demonstrate mass location. Consider "a hypermetabolic region by positron".

11) Figure 5: withour should be "without"; Describe how AB is different from CD.

→ we changed the figure according to your comment Thank you so much again.

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So I wish that you will consider this paper as suitable publication in your journal. Thank you again.