

## **Response to Reviewer Comments**

We thank the reviewers and editors for their valuable comments, which helped strengthen our manuscript. All comments were accepted and the appropriate changes were made in the manuscript using “track changes.” Thank you for your time and consideration of our manuscript.

### **Reviewer # 01560036**

**Nice and interesting case. One Misprint: Page 5, Paragraph 2: Coxorubicin?**

We thank the reviewer for the positive feedback. The identified misprint was noted and corrected throughout the manuscript.

### **Reviewer # 00058381**

**This is an interesting case report on an important topic; however, providing a description of a single patient, this manuscript is of limited scientific value. This drawback is mentioned by the authors at the end of the discussion.**

We thank the reviewer for the positive feedback. We do recognize the limitations of a case report as indicated in the manuscript. However, given that the standard of care is chemotherapy and transarterial chemoembolization with possible surgical resection, this report represents a new, innovative treatment option with enduring response for patients with metastatic adrenocortical carcinoma. We hope that this case report will prompt larger, future studies to further evaluate the role of these therapies.

**Further comments: Figure 3: Are the same section planes used in these images (A and B; C and D)?**

Yes, the same planes are used as the reviewer indicated.

**Text and figure legends: Please check the text and the figure legends once again for spelling errors (e.g., page 5, first paragraph: “aldoesterone” -> aldosterone; figure legend 1: “magnification” -> magnification).**

The identified spelling errors were noted and corrected. The manuscript was also comprehensively reviewed for errors.

### **Reviewer # 01221925**

**This is an interesting paper looking at the use of Yttrium-90 microspheres in the management of hepatic metastases from adrenocortical carcinoma.**

We thank the reviewer for the positive feedback.

**Could the authors please respond to the following questions/comments? Despite the fact that the authors show an excellent result with the use of the Yttrium-90 microspheres, the question remains whether this method/strategy is superior to the use of TACE. Also, could the authors comment on the potential financial cost/benefits between the two procedures for the management of the hepatic metastatic disease? The authors may wish to broaden the discussion regarding the**

**current literature in the use of Yttrium-90 microspheres for different hepatic metastatic lesions in order to provide a better perspective to the reader.**

Comparison of Yttrium-90 microspheres vs TACE is limited in the literature. No superiority studies have been performed, and large multicenter trials are needed for further evaluation of the two therapy modalities particularly for adrenocortical metastatic disease to the liver. As indicated in the manuscript, the benefit of Y-90 therapy over TACE is that it can be delivered in an outpatient setting rather than the inpatient setting, which is more convenient for the patient and is more cost-effective. The limitation of Y-90 therapy is that it utilizes a radioactive isotope so planning the procedure and ordering the agent in time for the therapy session based on the half-life of Y-90 is critical, compared to TACE which can be delivered without preplanning. While Y-90 radioembolization has been primarily studied as a locoregional therapy for hepatic metastases from colorectal carcinoma or for multifocal hepatocellular carcinoma, we present its first successful utility when coupled with surgery and systemic chemotherapy to treat a patient with advanced ACC. Review of the literature including the landmark trials for Y-90 to date are explained in the third paragraph of the discussion.

**Reviewer # 03548357**

**This is well written case report of a metastatic adrenocortical carcinoma treated with combined radionuclide therapy, chemotherapy and surgical resection. It appears to be an important paper since there is no published paper of utilizing yttrium-90 microsphere selective internal radiation therapy for ACC. Authors discussed both medical and surgical aspects in sufficient detail and addressed controversial issues. Figures and illustrations are well prepared.**

We thank the reviewer for the positive feedback.

**Reviewer # 02733521**

**Authors present a case report treated with a combination of Y90 and chemotherapy. In my opinion the case is interesting however it not deserve to be publish in WJCO. We thank the reviewer for the positive feedback.**