Manuscript number: 45388

Title: Intra-abdominal desmoid tumors mimicking gastrointestinal stromal tumors: 8 cases and comprehensive review

Letter to the Editor

World Journal of Gastroenterology

Dear Editor-in-Chief,

We would like to thank you and all the reviewers for your favorable and respectful comments to our manuscript. We revised our manuscript by taking into account all the comments and suggestions provided by the reviewers, and the corrected parts were highlighted. We have taken every effort to clarify all the points raised by the reviewers.

All the listed coauthors have reviewed and approved the changes in the revised manuscript.

We believe that we have satisfactorily responded to all the comments and suggestions, as shown below. We do hope that our manuscript can be positively considered for publication in your prestigious journal, *World Journal of Gastroenterology*.

Please let us know if there is anything that we have unintentionally neglected in the revised manuscript.

Again, we appreciate your perseverance in providing helpful suggestions and consideration of our manuscript.

Sincerely yours,

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Response to Reviewer 1

Comment 1) The review on desmoid tumors mimicking gastrointestinal stromal tumors gives a unique contribution to the management of the diagnosis and treatment of desmoid tumors. The cases are well discussed and the bibliographic reference is comprehensive. For these reasons, the work deserves publication after a minor language review.

Answer 1) We are grateful to the reviewer`s comment. The manuscript has been carefully reviewed by an experienced editor whose first language is English and who specializes in editing papers by the reviewer`s comment.

Response to Reviewer 2

Comment 1) Both desmoid tumor(DT) and GIST belong to mesenchymal tumors. The main pathogenesis of GIST is the mutation of KIT gene or PDGFRA gene. At present, little is known about the pathogenesis of DT. Trauma or surgery may be the potential trigger for DT. In addition, abnormal activation of PDGFR and C-kit receptors may also be an important cause of DT. Therefore, it is not uncommon that both GIST and DT occur simultaneously or successively in clinic, and some DTs are sensitive to imatinib, the target drug of GIST. In practice, differential diagnosis of GIST recurrence and DT is helpful for patients 'prognosis evaluation and choice of treatment. The manuscript retrospectively analyzed the eight patients with intra-abdominal DT after GIST in single-center. The clinical features and imaging findings before DT excision were classified and sorted out, and the preliminary characteristics for differential diagnosis were given on the basis of reviewing the previous literature. This work was of certain value in clinic practice. In the future, more in-depth studies on these patients are needed to reveal the relationship between the two types of tumors and the mutual impact of prognosis in a more comprehensive and in-depth manner.

Answer 2) We are grateful to the reviewer`s decision.