

Dear Editors and Reviewers:

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "Primary intratracheal neurilemmoma in a 10-year-old girl: A case report". Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our work. We have studied comments carefully and have made correction which we hope meet with approval. The main corrections in the paper and the responds to the reviewer's comments are as flowing:

Reviewer

Major points - none Minor points - based on the atypical presentation and rare incidence, what is your recommendations for diagnosing and follow-up.

Response:

Pulmonary function testing is an effective method to distinguish tracheal neurilemmomas from asthma. Chest CT or MRI can be used to measure the tumor's size, location, and degree of intratracheal and extratracheal invasion. In this case, we reviewed the examination results before admission. Two months previously, we had discovered a mass in the upper part of the trachea. Lung function testing had also indicated an inspiratory phase obstruction, but it was initially ignored. In patients with an atypical presentation of asthma but with no response to anti-asthma treatment, bronchoscopy can detect airway tumors early and avoid misdiagnosis. (page7-8, line197-206)

Nearly one-fourth of patients who undergo endoscopic resection develop recurrence. The time of recurrence is variable, but there is a chance of late recurrence. Given that these tumors grow slowly, it is preferable to performed yearly bronchoscopic observations. If the tumor continues to grow, tracheal resection is the best option. Outcomes and complications such as airway stenosis and tumor recurrence should be consistently evaluated under long-term follow-up. (page9, line236-242)

We tried our best to improve the manuscript and made some changes in the manuscript. We appreciate for Editors and Reviewers' warm work earnestly, and hope that the correction will meet with approval. Once again, thank you very much for your comments and suggestions.

Best Regards,

Yingshuo Wang