Dear Editor,

Thank you very much for your decision letter and advice on our manuscript entitled *Inflammatory Myofibroblastic Tumor of the Central Nervous System: A Case Report and Literature Review.* We also thank the reviewers for the constructive comments and suggestions. We have revised the manuscript accordingly, and all amendments are indicated by red font in the revised manuscript. In addition, our point-by-point responses to the comments are listed below this letter.

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Please revise and submit according to the format requirements of the World Journal of Clinical Cases. The length of the case is too long. Please strictly control the writing requirements corresponding to each part of the content.

Response: Thank you for these comments. We have revised the manuscript according to the journal's formatting requirements. In addition, we have shortened the length of the case description.

Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: this an interesting case report and good literature review of a rare CNS tumour IMT. the study highlights the importance of imaging and treatment modality of such tumour, and as it is mimic other intracranial lesion additional immunohistochemical analysis are needed preoperatively and continued post operative imaging and treatment is also needed. the study high lights that higher recurrence rate of IMT in relation to expression of ALK protein a receptor tyrosine kinase gene, an assessment that is proposed to be done to assess risk of recurrence after surgery. As this is a rare tumour in CNS, the study does summarise the available date so far, the presentation, treatment strategy, diagnosis and risk of recurrence. the

study indicate that IMT have a high recurrence compared to other intracranial tumour, long term follow up investigation is required. My comments are in the abstract section there are repeat of sentence and suggest instead of conclusion change to discussion as suddenly change from a case study to a summary of literature. in the introduction described studying 100 cases but then only 49 cases is what is mentioned? at imaging described a left middle cranial fossa mass at surgery tumour is located at the base of anterior cranial fossa? Age range of disease mentioned some time 3 months but then 8 months what does is it mean comprehensive treatment compared to complete resection? there are repeated section in epidemiology with previous section. need improvement of article language,

Response: Thank you for your valuable comments. This patient was followed up at 3 months after surgery. Head MRI showed that the tumor at the bottom of the left anterior cranial fossa had been completed resected without recurrence. As the tumor was completely wrapped around the left optic nerve before surgery, the nerve was inevitably injured during surgery. General medical examination showed that the vision of the left eye had improved to a level slightly lower than that pre-operation. The function of the left abducens nerve was restored. In addition, headache and ophthalmalgia were completely resolved. The patient did not come to our hospital for further follow up, but we will attempt to contact the patient for long-term follow up.

We have proofread the Abstract section and shortened the length of the Conclusion section.

Since the first report of a case of intracranial IMT, a total of 100 cases of IMT-CNS have been reported. However, a total of 49 cases were reported between the years 2000 and 2021 based on the timing of the WHO definition. We analyzed these 49 cases in our literature review.

We apologize for the typographical error. The tumor was indeed located at the base of the left anterior cranial fossa. In addition, the youngest reported age at onset is 3 months rather than 8 months.

4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Response: We have carefully polished the language of the manuscript.

We hope that our revised manuscript is now acceptable for publication in your journa	al
and look forward to hearing from you soon.	

Yours sincerely,

Xin-Yu Hong