

Reviewer #1

Q: Removing unnecessary information in the introduction and explaining the physical examination findings in more detail in the case section are my humble suggestions.

Apply: Thank you very much for your suggestions! We modified the above questions and marked the modified parts in red. See below for changes:

A 55-year-old man, nonsmoker, had a three-month history of progressively coughing up yellow sputum, chest stuffiness, and shortness of breath. He had no chest pain, fever, night sweats, or weight loss. Physical examination did not show any signs of superficial lymph node enlargement. No rales, two lungs breathing clearly.

Reviewer #2:

We really appreciate your questions, and modifications in the manuscript are highlighted in green.

Q1. MALT abbreviation has been used for - Mucosa-associated lymphoid tissue (MALT) - mucosa-associated lymphoid tissue and marginal zone lymphoma (MALT) - extranodal marginal zone lymphoma of the mucosa-associated lymphoid tissue (MALT) This abbreviation must be unique and must be given only in the first time.

Apply1:

We appreciate your advice and apologize for the errors in the manuscript. We have modified the MALT abbreviation to consistent: Mucosa-associated lymphoid tissue (MALT), which highlighted in green. See below for changes:

Abstract: A 55-year-old man admitted to hospital had a three-month history of progressively coughing up yellow sputum, chest stuffiness, and shortness of breath. Fiberoptic bronchoscopy revealed mucosal visible beaded bumps 4 cm from the tracheal carina at 9 o'clock and 3 o'clock, the right main bronchus, and the right upper lobe bronchus. Biopsy specimens showed **mucosa-associated lymphoid tissue (MALT) lymphoma**.

Keywords: **Mucosa-associated lymphoid tissue (MALT) lymphoma;**
Biopsy specimens showed **MALT lymphoma** (Figure 2).

Q2. BALT and CTVB abbreviations has to be given only in the first use and then must be written as abbreviation.

Apply2:

We apologize for the errors in the manuscript. We have modified the BALT and CTVB abbreviations, which highlighted in green. See below for changes:
BALT lymphoma can manifest as solitary intraluminal nodules, a diffuse wall thickening, and several tiny nodular protrusions in CT scans. Chest CT alone is not usually sufficient to determine the scope of the lesions. A bronchoscope is important in diagnosis and therapy. In our case, the patient received **CTVB** before RT, at the end of RT, and 1.5 month after RT to determine the scope of the lesions and evaluate the effect.

Q3. As can be understood from Figure 5 D the case has been followed up for 3.5 years, but in the main manuscript we cannot find this knowledge. Please I offer to add this to the case presentation- outcome and follow-up section too.

Apply3:

Thank you for your suggestion, which we added "The case have been followed up for more than 3.5 years", which highlighted in green. See below for changes:

The case had been followed up for more than 3.5 years, and annual CTVB showed no signs of recurrence (Figure 5A-D). The patient now shows no symptoms. Long-term efficacy requires further follow-up.

Q4. In discussion "Theodore Girinsky, M.D., 10 patients were treated using small radiation

doses (2*2 Gy) delivered exclusively to tumor sites. The median follow-up was 56 months. All patients are now alive with no local progression. The five-year progression-free survival rate was 87.5% (6 CR, 4 PR).” This part has no reference at the end. I think it is the 21. Ref and if so then the references must be replaced to a new order.

Apply4:

We apologize for the errors in the manuscript. We verified and supplemented the serial numbers of the references, which highlighted in green. See below for changes:

In a report by Theodore Girinsky, M.D. [21], 10 patients were treated using small radiation doses (2*2 Gy) delivered exclusively to tumor sites. The median follow-up was 56 months. All patients are now alive with no local progression. The five-year progression-free survival rate was 87.5% (6 CR, 4 PR).

Q5. In Table 1. “Table 1. This is a table. Tables should be placed in the main text near to the first time they are cited. This sentence has to removed and a sentence that explains the table should be written. At the end of the table the abbrev. Like OS, PR, CR must be written in the long way. The last case in the table is the case of this manuscript and for the follow of part the follow up period and the final status of the patient must be clearly defined, instead of writing follow-up.

Apply5:

We apologize for the errors in the manuscript. The sentence “Table 1. This is a table. Tables should be placed in the main text near to the first time they are cited” have been removed, and Table 1 was explained as “The literature review of BALT” . See below for changes:

Table 1. The literature review of BALT

The final status of the patient in the table was modified to “Survive more than 3.5 years”, which was highlighted in green in the last line of Table 1.

Q6. In the treatment section the radiotherapy dose and fractionation has been given but the technique, machine, etc. must be given and this section must be detailed. This case report can be accepted with these minor revisions. It has a valuable effect to literature as the author mentioned that there is no standard treatment of this cases. A complete response and good follow up period is an important finding of this manuscript.

Apply6: Thank you so much for approving this case report. The information about the machine and technique have been added highlighted in green. See below for changes:

No lymphadenopathy or chronic lung disease was present. BALT lymphoma stage IE was diagnosed was diagnosed. We treated the patient with radiotherapy (RT) alone. **Intensity – modulated radiation therapy(IMRT) was performed with Elekta linear accelerator.** A total dose of 30.6 Gy/17 f/25 d was given. The process went well. The patient had no obvious adverse reactions, and all symptoms disappeared. After completing RT, CTVB was repeated and showed the right side of the trachea was slightly thickened (Figure 4B).