

Reviewer #1:

Specific Comments to Authors:

This manuscript presented a case of HGSC of unknown origin that was managed using retroperitoneal lymphadenectomy, staging surgery, chemotherapy, and targeted therapy. Ongoing monitoring is essential to evaluate patient prognosis. This case is the first to report tumor marker elevation during a regular health examination without other noted symptoms. The development of retroperitoneal serous carcinoma is believed to be linked to endosalpingiosis and a remnant Müllerian tract. Various gene mutations, including KRAS, NRAS, TP53, and BRCA, are associated with retroperitoneal serous carcinoma. The diagnosis and the treatment of retroperitoneal carcinoma are difficult. The author thinks surgery is the only way to provide a definitive diagnosis. However, considering its histological type and pathogenic similarity to high-grade ovarian serous carcinoma, it is worth investigating further. I think the pathogenesis and genetics of the disease should be explored in the future. The author should summarize the experience to find the most appropriate diagnosis and treatment.

Response: We thank the reviewer's comments. We have summarized our experience in diagnosis and treatment.

Reviewer #2:

Dear Author(s),

The article has been written with great attention, which is outstanding. I simply recommend changing the study's title to a more specific one, as well as updating the reference list with references from 2023 and five years before that, especially for references older than this particular period.

Response: We thank the reviewer's comments. We have updated the title to "Management of retroperitoneal high-grade serous carcinoma of unknown origin: A comprehensive case report". We also have updated the reference list to within 5 years from 2023.