

May 19, 2015



Title: Gastric carcinoma originating from the heterotopic submucosal gastric gland treated by Laparoscopy and Endoscopy Cooperative Surgery

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Name of Journal: World Journal of Gastrointestinal Oncology

ESPS Manuscript NO: 17983

Dear Fang-Fang Ji

Science Editor Editorial office "**World Journal of Gastrointestinal Oncology**"

Thank you for your kind letter concerning invited manuscript entitled "**Gastric carcinoma originating from the heterotopic submucosal gastric gland treated by Laparoscopy and Endoscopy Cooperative Surgery (ESPS Manuscript NO: 17983)**" by Komatsu et al. We have revised the manuscript according to editor's and reviewer's comments using a red color font (highlighted revise version) and presented the outlining responses to your comments below.

We thank you for the valuable suggestions and comments for the manuscript. We have carefully revised it accordingly. Explanations have been provided point by point. We believe that our revised manuscript has been improved by these revisions, and satisfy your concerns. We cordially appreciate your work regarding our manuscript. We hope that the revised manuscript is now acceptable for publication in the "**World Journal of Gastrointestinal Oncology**".

Sincerely yours,

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Comments to authors from editor

The review of your manuscript (ESPS Manuscript NO: 17983) entitled "Gastric carcinoma originating from the heterotopic submucosal gastric gland treated by Laparoscopy and Endoscopy Cooperative Surgery ", which you submitted to the World Journal of Gastrointestinal Oncology, is now completed and the first decision for publication is available.

Based on the reviewers' comments, your manuscript may be accepted for publication if the suggested revisions are incorporated and the subsequent re-review is positive. In addition to revising your manuscript according to the reviewers' comments and the formatting and presentation standards of the World Journal of Gastrointestinal Oncology, you are expected to address each of the points raised by the reviewers in a response letter that is to accompany your resubmission.

Response to editor's comments

Thank you for your kind and promising letter concerning invited manuscript. We have revised the manuscript according to editor's comments as follows. We believe that our revised manuscript have been improved by revisions, and satisfy your concerns. We cordially appreciate your work regarding our manuscript. We hope that the revised manuscript is now acceptable for publication in "**World Journal of Gastrointestinal Oncology**".

Query 1

Any article describing a study involving human and/or animal subjects is required to have the institutional review board (IRB) name, whether institutional or commercial/independent/private, stated explicitly in the title page.

Query 2

Any research article describing a study involving humans should contain a statement in the title page clearly stating that all involved persons gave their informed consent prior to study inclusion.

Query 3

A conflict-of-interest statement is required for all article and study types

Reply 1, 2, and 3

Thank you for your comments. As you indicated, we added Ethic approval, Informed consent, and Conflict-of-interest statement in the title page. In addition, we provided a copy of ethics approval document, Informed consent statement, and Conflict-of-interest statement in PDF format.

Query 4

Please write the COMMENTS section.

Reply 4

Thank you for your comment. We added the COMMENT section at the end of main article as follows.

COMMENTS

Case characteristics

A 66-year old man who underwent upper endoscopy in a medical checkup, which showed a submucosal tumor on the upper gastric body.

Clinical diagnosis

The presented patients had submucosal gastric tumor that could not be diagnosed histologically by endoscopic biopsy.

Differential diagnosis

gastrointestinal stromal tumor, early gastric tumor, smooth muscle tumor,

Laboratory diagnosis

There were no abnormal findings in laboratory examinations including tumor markers.

Imaging diagnosis

Endoscopic ultrasound and CT showed that the tumor was derived from the third layer of the gastric wall.

Pathological diagnosis

Pathological examination confirmed that the tumor was an intrasubmucosal tumor that was a well differentiated adenocarcinoma.

Treatment

Laparoscopy and Endoscopy Cooperative Surgery (LECS) for gastric local resection was selected as decision-making for a pathological diagnosis and safe removal.

Term explanation

LECS, Laparoscopy and Endoscopy Cooperative Surgery; HGS, heterotopic submucosal gastric gland.

Experience and lessons

Gastric carcinoma originating from the heterotopic submucosal gastric gland forms a submucosal gastric tumor and is often difficult to diagnose by endoscopic biopsy. If unable to deny malignant disease, resection of the tumor should be considered.

Query 5

Please offer total figure legends for Fig. 1 and Fig. 2.

Reply 5

Thank you for your comment. As you indicated, we added total figure legends as below.

Fig. 1 **Results of pre-operative examinations**

Fig. 2 **Results of histopathological examinations**

Reviewer:**Reviewer code:** 6675**Date reviewed:** 2015-04-07 16:48**Comments to Authors:**

This is a case report on the use of Laparoscopy and Endoscopy Cooperative Surgery (LECS) in the diagnosis and successful treatment of gastric carcinoma originated from the heterotopic submucosal gastric gland. The only criticism is the moderate originality of the paper, since several similar cases have been reported in the last few years. Otherwise the paper is interesting, well written and contains valuable data.

Classification: Grade C (Good)**Language evaluation: Grade B: minor language polishing****Conclusion: Accept****Response to reviewer's comments**

Thank you for your kind comments. We cordially appreciate your contribution to the review of our manuscript and found them to be great helpful.

Reviewer:**Reviewer code:** 58184**Date reviewed:** 2015-04-05 16:48**Comments to Authors:**

This manuscript described a rare case of submucosal gastric carcinoma originating from the heterotopic submucosal gastric gland and the authors also described the treatment of the carcinoma by Laparoscopy and Endoscopy Cooperative Surgery. By this manuscript, endoscopists can learn how to diagnose and treat submucosal carcinoma like the reported case.

Classification: Grade A (Excellent)**Language evaluation: Grade A: priority publishing****Conclusion: Accept****Response to reviewer's comments**

Thank you for your kind comments. We cordially appreciate your contribution to the review of our invited manuscript and found them to be great helpful.