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Manuscript Type: Case Report

Title : Endoscopic resection of sparganosis presenting as colon submucosal tumor

We thank sincerely for your comments. We revised the draft manuscript according to reviewers' comments.

Reviewer 1:

The authors present an interesting case study reporting on a rare differential diagnosis of a subepithelial tumor, i.e. sparganosis. Therefore, I would like to encourage the authors to focus on the fact that ESD is a rather uncommon way in order to treat sparganosis as it is always hard to rule out a multilocular appearance of the parasit. Furthermore, some additional endoscopic images of the ESD procedure would grade up the case report.

Thanks for your good points.

Major 1:

We addressed your points in the discussion part of our case report as follows : (page 8, line 230-232)

Although the ESD is a rather uncommon way in order to treat sparganosis, ESD can be considered for both diagnostic and therapeutic purposes like our case.

Major 2:

We added endoscopic images of the ESD procedure in figure 3.

Reviewer 2:

Comments to the author This article is very interesting from the point of the parasitic disease because rectal sparganosis is an uncommon and rare. Furthermore, ESD performed to remove this parasite lesion was probably the first case. This text was well-written English and the figures were also fine. However, some minor revisions are needed. Minor 1. (Page 3, line 65) (Page 5, line 1) (Page 5, line 133) ("in Southeast Asia, China, Japan, and Korea." was rather incorrect. You'd better to revise as follows; "in Southeast Asia such as China, Japan, and Korea." 2. (Page 4, line 96-97) "For complete resection of the lesion," was also rather incorrect. You'd better to revise as follows; "For complete and total resection of the lesion" 3. (Page 5, line 141-143) "ELISA performed for sparganum-specific IgG is highly sensitive and specific. Serum ELISA has 88% sensitivity and 97% specificity." Please add the references with regard to Serum ELISA sensitivity and specificity of sparganum parasite. 4. Figure 1: Please delete the date of the endoscopy for privacy of the patient.

Thanks for your good points.

Minor 1.

We revised as follows:

Infections caused by sparganum have a worldwide distribution but are most common in Southeast Asia such as China, Japan, and Korea. (page 3, line 67-69)

Infections caused by sparganum have a worldwide distribution but are most common in Southeast Asia such as China,, Japan, and Korea. (page 5, line 127-128)

Infections caused by sparganum have a worldwide distribution but are most common in Southeast Asia such as China, Japan, and Korea. (page 7, line 193-194)

In addition, he had never traveled in Southeast Asia such as China, and Japan. (page 7, line 202-203)

Minor 2.

We revised as follows: (page 6, line 165-167)

For complete and total resection of the lesion and accurate histological diagnosis, we performed an ESD

Minor 3.

We added the reference with regard to Serum ELISA sensitivity and specificity of sparganum parasite.

Serum ELISA has 85.7% sensitivity and 95.7% specificity. (page 7, line 211-213)

→ **Kim H**, Kim SI, Cho SY. Serological diagnosis of human sparganosis by means of micro-ELISA. *Korean J Parasitol* 1984; **22**:222-228 (reference 6)

Minor 4.

We delete the date of the endoscopy for privacy of the patient in figures.

Reviewer 3:

This is a rare case report for GI man. When the procedure of endoscopy, the parasitic infection with mass formation could be keep in mind.

Thanks for your comments.

Reviewer 4:

This paper presents a rare rectal sparganosis infection mimicking rectal submucosal tumor including a clear description of family history, personal history, clinical tests, treatment and prognosis of the patient. This case provides an interesting diagnosis of intestinal submucosal tumor which may contributes to the differential diagnosis of that. However, some description repeated a little more in this paper and it will be

better to add the distinguish between this case and other common intestinal submucosal tumor.

Thanks for your good points.

Minor 1:

We rechecked the repeated statements and corrected a little.

Minor 2:

We addressed your point in the discussion part of our case report as follows : (page 8, line 226-228)

Though rare, rectal sparganosis should be considered in the differential diagnosis of rectal SMT-like lesions.

Reviewer 5:

The author reported the 'Endoscopic resection of sparganosis presenting as colon submucosal tumor. A case report'. These findings are rare and should be considered in the differential diagnosis of submucosal tumor in gastrointestinal tract. It is well organized and systemically analyzed. Reviewer hopes that this manuscript would be accepted.

Thanks for your comments.