

May 18th, 2016

Lian-Sheng Ma, President and Company Editor-in-Chief

World Journal of Gastroenterology

World Journal of Gastroenterology Editorial Office



Dear Editor,

We wish to revise the attached case report entitled “A case of a tumor comprising early gastric cancer and duodenal neuroendocrine tumor resected by endoscopic submucosal dissection” for possible publication as a Case Report in *World Journal of Gastroenterology*. Endoscopic submucosal dissection (ESD) has become a widespread technique for gastric cancer and is also used for other cancers such as esophagus, colon, rectum, and recently, most duodenal tumors. Duodenal neuroendocrine tumor (NET) is a rarely encountered tumor, with fewer cases reported compared to gastric and rectal carcinoid tumors, and the natural history has not yet been well defined. Although there are some reports of endoscopic resection, no reports have been published on the treatment duodenal NET composed of early gastric cancer treated by ESD. We report the first case of early gastric cancer accompanied by duodenal NET resected by ESD.

We have included point-by-point responses that indicate the revision made to the text. We also revised the manuscript according to the format for manuscript revision provided by WJG.

Thank you for your consideration. We look forward to hearing from you.

Sincerely,

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Point-by-point response to reviewers:

Reviewer 1.

Thank you very much for your comments.

Reviewer 2.

Thank you very much for your comments.

We have revised the manuscript according to your suggestion.

1. *Would recommend a minor revision to include in the discussion comments if the remainder gastric mucosa was normal or atrophic.*

We added a comment of remainder mucosa. “Most of the tumor was present in the stomach and remainder gastric mucosa was atrophic, allowing the adenocarcinoma derived from the gastric epithelium to be diagnosed as not from duodenum.”

2. *Would recommend a minor revision to comment about the association between other gastric tumors and NET, review of the other cases in the literature until the present case (Morishita had 5 cases, Kim 1 etc).*

We have added the comments about the case reported by Morishita et al in discussion.

“Although there were some reports about gastric collision tumor composed of epithelial and nonepithelial malignant neoplasm, Morishita *et al.* reported that a simultaneous incidence of adenocarcinoma and malignant lymphoma was the most frequent finding and cases of gastric collision tumor composed of adenocarcinoma and NET were rare [5].”

3. *Please include a higher power of the morphology of the neuroendocrine tumor alone.*

We have added higher power of the morphology of the NET alone in figure 3.