

Editor in Chief, *World Journal of Gastrointestinal Endoscopy*
Lian-Sheng Ma, President and Company Editor-in-Chief
Ze-Mao Gong, Vice Director, Editorial Office

Sep 4, 2017

Dear Editors and Reviewers,

Thank you and the reviewers for a thorough review of our manuscript entitled “**Endoscopic ultrasound-guided fine-needle aspiration for diagnosing a rare extraluminal duodenal gastrointestinal tumor**” (INVITED CASE REPORT ID 00188507) by Kazunao Hayashi, et al, and myself for publication as an invited case report in *World Journal of Gastrointestinal Endoscopy*. The provided ID for this invited review is (00188507).

The thoughtful comments from the reviewers are greatly appreciated. In preparing for revision, we have carefully studied reviewers’ comments and incorporated many of their suggestions into the revised manuscript. For your convenience, we have highlighted the changes made in blue. We hope this revised manuscript is now acceptable for publication in *World Journal of Gastrointestinal Endoscopy*. The provided ID for this invited CASE REPORT is (00188507).

We declare that this work is original, the manuscript is not under consideration by other journals, and the material has not been previously published. All authors approved the contents submitted. We look forward to hearing from you at your earliest convenience.

Thank you for your consideration.
Sincerely yours,

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Dear Reviewers:

Thank you very much for your thoughtful comments and suggestions. In preparing the revision, we have carefully studied your comments and incorporated many of your suggestions into the revised manuscript. The following are our point-by-point responses to your comments/concerns. For your convenience, we have highlighted the changes made in blue.

Title: “Endoscopic ultrasound-guided fine-needle aspiration for diagnosing a rare extraluminal duodenal gastrointestinal tumor” (INVITED CASE REPORT ID 00188507)

Reviewer #1

Nice presentation.

Response: We appreciate for a thorough review of our manuscript and are grateful for the positive comment.

Reviewer #2

This is a well written and good case.

1. Duodenal GIST usually presents with melena due to upper gastrointestinal bleeding and associated anemia, please explain the presentation and lab tests of this case more in detail.

Response: We appreciate for the positive comment. We have added the description (page 6, line 8 from the bottom, page 7, line 1 from the top).

2. The authors said that the imaging studies (CT scan and MRI) suggested an atypical pattern for a pancreatic cancer. I disagree with this comment, because according to my clinical experience, diagnosis of this patient might be a duodenal GIST or pancreatic head neuroendocrine tumor. Thus, a pancreatic neuroendocrine tumor may be more appropriate. What does the tumor locate in the duodenum, the second part? And what's the exact surgery for her? It seems that the patient underwent partial resection of the second part of the duodenum, and then end to end anastomosis?

Response: We have modified the descriptions (page 7, line 12 from the top) and added the description (page 7, line 1 from the bottom).

3. For Table 1, it is considered that S-100 and Ki-67 are not important for GISTs, they should be replaced by mitosis.

Response: We have modified the descriptions. (page 8, line 8 from the top, legend for Figure 5, Table 1)