

Answers to Reviewers' Comments

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Analysis of Intrahepatic Sarcomatoid Cholangiocarcinoma: Experience from 11 Cases Within 17 Years

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Answers to the comments of reviewer (code 00053888)

1. As you commented, 9 among the 11 s-CCC patients enrolled in this study, were thought to be sarcomatoid variants of intrahepatic cholangiocarcinomas and the remaining 2 were suspected to be sarcomatoid combined hepatocellular-cholangiocarcinomas. Diagnoses of the latter 2 patients are supported by the increased AFP levels and histopathologic findings (Figure 2, Table 2, and Discussion).

2. As we mentioned in discussion, the incidence of chronic viral hepatitis and LC was higher in s-CCC patients, and these underlying chronic liver diseases are thought to be the causative factors for de-differentiation or biphasic differentiation. This hypothesis also may support the poor prognosis of s-CCC (Table 6, Discussion).

3. All of the 11 s-CCC patients showed peripheral type of cholangiocarcinoma, and 5 (45.5%) patients among them had LC. Your comment that solid peripheral lesions in cirrhotic livers can have unusual differentiation features and sarcomatoid differentiation in HCC is very reasonable (Table 1 and 6, Discussion).

4. The proportion of HBV or HCV infection and/or LC of the remaining group was already described in Table 6.

5. This manuscript was already edited by professional english language editing companies before the first submission, and we've already submitted the "language certificate". We did review the whole manuscript again and corrected the typographical errors.

6. We made the discussion section more reduced, concise, and clear through revision. The messages that we attempted to deliver are mentioned in discussion with more clear and organized description.

Answers to the comments of reviewer (code 00069105)

1. Because of importance of biopsy in diagnosis of s-CCC, we attempted to describe the histopathologic findings in detail. Therefore, the commenting of histological results is somewhat focused on images. For easier understanding of the histopathological findings, the immunohistochemistry results are summarized detailed in Table 4.

2. To support the analysis results and conclusion of this study, we referred to the data of additional previously published report (Reference No. 23).

3. We made the discussion section more reduced, concise, and clear through revision. The messages that we attempted to deliver are mentioned in discussion with more clear and organized description.

4. In accordance with your excellent comment, we newly performed the comparison of intrahepatic sarcomatoid cholangiocarcinoma and intrahepatic bile duct adenocarcinoma without subdividing the CCC group by the differentiation grade (Table 6).

Answers to the comments of reviewer (code 03074545)

1. In accordance of your excellent comment, we performed further detailed analysis about 11 s-CCC patients and compared with those of CCC patient or other previous studies (Discussion).

2. We made the discussion section more reduced, concise, and clear after revision. The messages that we attempted to deliver are mentioned in discussion with more clear and organized description to emphasize the authors' point of view.