

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Dear authors, your case report represents very interesting data about rare type of ovarian carcinoma. As described case is a rare condition, this case report would be interesting for the readers. Information about patient consent to publish data is necessary. As per my opinion authors should include more information about patient, especially gynecological history, including menstrual and contraceptive history, concomitant diseases (if any). There are some syntax errors and misspelling throughout the paper. As the case is rare and interesting, this case report may be published after the correction.

Response: Thanks for your professional suggestions.

Written informed consent was obtained from the patients for publishing this case. And this consent was addressed in the main text of the manuscript.

Informed consent statement: Informed consent was obtained before any medical investigation or initiation of treatment as required and patient agreed to published the case.

Information about gynecological history, including menstrual and contraceptive history, concomitant diseases were provided in the revised manuscript.

We are sorry for the spelling and grammar mistakes in the manuscript. The language had been made language polishing by a native English speaker and all spelling mistakes had been revised.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Dear Authors, as a case paper not bad but you need clearly by arrows and also resolution figur 2: a.b.c..... Regards

Response: Done, thanks for you suggestion. The pathology features demonstrated in the figures was pointed out by arrows.

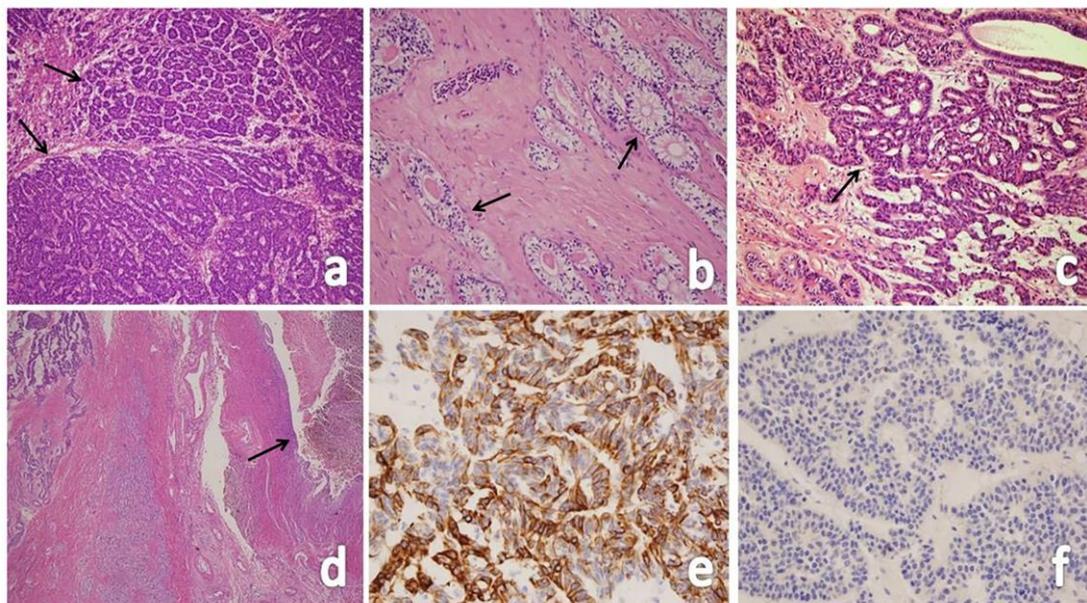


Figure 2. Pathology examination(HE stain) of the tumor and Immunohistochemical analysis [a:the tumors consisted of micro-adenoids , trabeculae and small tubular structures that resembled granulosa cell tumor, black arrow (HE×100); b: small tubular structures that resembled sertoli cell tumor, black arrow (HE×200); c:areas of typical endometrioid carcinoma, black arrow (HE×200); d: endometriotic cyst was seen next to the tumor, black arrow (HE×40); e: tumor cells diffusely expressed CK7 (EnVision ×400);f: tumor cells did not express α -inhibin (EnVision ×400)]

Step 6: Editorial Office's comments

The author must revise the manuscript according to the Editorial Office's comments and suggestions, which listed below:

(1) *Science Editor:* Recommend for potential acceptance.

1 Scientific quality: 2C. The article is about ovarian endometrioid carcinoma resembling sex cord-stromal tumor, within the scope of WJCC. Summary of peer-review report: The case report represents very interesting data about rare type of ovarian carcinoma. As described case is a rare condition, this case report would be interesting for the readers. There are some syntax errors and misspelling throughout the paper. 2 figures. 6 references were cited, no latest references from 2017-2020. No self-citation. 2 Language quality: A,B. Edited by Spandidos Publications language editing services. 3 Academic norms and rules: Case Report. Copyright license agreement, signed informed consent, CARE Checklist (2016) and Conflict-of-Interest statement files are complete and qualified. Bing search and CrossCheck are eligible. 4 Others: Without financial support. Corresponding author has not published articles in WJCC. Unsolicited manuscript.

Response:

(1) Written informed consent was obtained from the patients for publishing this case. And this consent was addressed in the main text of the manuscript.

(2) Information about gynecological history, including menstrual and contraceptive history, concomitant diseases were provided in the revised manuscript.

(3) We are sorry for the spelling and grammar mistakes in the manuscript. The language had been made language polishing by a native English speaker and all spelling mistakes had been revised.

(4) Reference had been update.

REFERENCES

- 1 Young RH, Prat J, Scully RE. Ovarian endometrioid carcinomas resembling sex cord-stromal tumors. A clinicopathological analysis of 13 cases. *Am J Surg Pathol* 1982;**6**:513-522 [PMID: 6890771 DOI: 10.1097/00000478-198209000-00003]
- 2 Ma YH ZQX, Li HX. Ovarian endometrioid adenocarcinoma resembling sex-cord tumors: a clinicopathologic study. *Clin Exp Pathol* 2013;**29**:45-48 [PMID: NA DOI: 10.13315/j.cnki.cjcep.2013.01.014]
- 3 Wang Q, Zhang HP, Zhuang YL. Ovarian endometrioid adenocarcinoma resembling sex cord-stromal tumor: report of a case. *Zhonghua Bing Li Xue Za Zhi* 2017;**46**:350-351 [PMID: 28468049 DOI: 10.3760/cma.j.issn.0529-5807.2017.05.019]
- 4 Taylor J, McCluggage WG. Ovarian Sex Cord-stromal Tumors With Melanin Pigment: Report of a Previously Undescribed Phenomenon. *Int J Gynecol Pathol* 2019;**38**:92-96 [PMID: 29140884 DOI: 10.1097/PGP.0000000000000471]
- 5 Boussios S, Moschetta M, Zarkavelis G, Papadaki A, Kefas A, Tatsi K. Ovarian sex-cord stromal tumours and small cell tumours: Pathological, genetic and management aspects. *Crit Rev Oncol Hematol* 2017;**120**:43-51
- 6 Young RH. Ovarian sex cord-stromal tumours and their mimics. *Pathology* 2018;**50**:5-15 [PMID: 29198337 DOI: 10.1016/j.critrevonc.2017.10.007]
- 7 Young RH. Ovarian Sex Cord-Stromal Tumors: Reflections on a 40-Year Experience With a Fascinating Group of Tumors, Including Comments on the Seminal Observations of Robert E. Scully, MD. *Arch Pathol Lab Med* 2018;**142**:1459-1484 [PMID: 29132723 DOI: 10.1016/j.pathol.2017.09.007]
- 8 Katoh T, Yasuda M, Hasegawa K, Kozawa E, Maniwa J, Sasano H. Estrogen-producing endometrioid adenocarcinoma resembling sex cord-stromal tumor of the ovary: a review of four postmenopausal

cases. *Diagn Pathol* 2012;7:164 [PMID: 23190574 DOI: 10.1186/1746-1596-7-164]

- 9 Guerrieri C, Frånlund B, Malmström H, Boeryd B. Ovarian endometrioid carcinomas simulating sex cord-stromal tumors: a study using inhibin and cytokeratin 7. *Int J Gynecol Pathol* 1998;17:266-271 [PMID: 9656124 DOI: 10.1097/00004347-199807000-00012]

(2) Editorial Office Director: 1 Scientific quality: I have checked the comments made by the science editor, and I basically agree with the science editor. The topic of the paper is within the scope of the WJCC. (1) Classification: Two Grade C; (2) Summary of the Peer-Review Report: Reviewer 02951258 summarized that this case report represents very interesting data about rare type of ovarian carcinoma, and suggested the authors to include more information about patient. Reviewer 02682232 suggested the authors to improve the figures. The questions raised by the reviewers should be answered; and (3) Format: I have checked the manuscript, and I agree with the science editor. 2 Language evaluation: I agree with the comments made by the science editor. A language editing certificate issued by Spandidos Publications was provided. 3 Academic norms and rules: I have checked the documents, including the Conflict-of-Interest Disclosure Form, Copyright License Agreement, and the Informed Consent Statement, all of which are qualified. No academic misconduct was found in the CrossCheck detection and Bing search. 4 Supplementary comments: This is an unsolicited manuscript. No financial support was obtained for this study. 5 Issues raised: (1) I found that the author contributions is missing. Please provide the author contributions; (2) I found the abstract is not written according to the guideline of the journal. Please re-write it. (3) I found the core tip section is missing. Please write the "core tip" section behind of the key words. (4) I found that the "case report" section is not written according to the guideline of the journal. Please re-write the case report section (Case Presentation), and add FINAL DIAGNOSIS, TREATMENT, and OUTCOME AND FOLLOW-UP section to the main text accordingly. (5) I found the PMID

numbers are missing in the reference list. Please provide the PubMed numbers to the reference list and list all authors of the references. Please revise throughout; (6) I found that the figures can't be edited. Please provide the original figure documents. All submitted figures, including the text contained within the figures, must be editable. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor; 6 Recommendation: Conditionally accepted.

Response:

5 Issues raised:

(1) Author contribution was added in the revised manuscript.

Author contributions: Wei XX and He YM reviewed the literature and contributed to manuscript drafting; Li L was the consulting dermatologist and analyzed and interpreted the pathology; Jiang W directed the diagnosis and reviewed the literature; and all authors approved the final version for submission.

(2) The abstract was re-written according to the guideline of your journal.

(3) The core tip section was added in the revised manuscript.

Core tip: In the clinicopathological diagnosis, if ovarian tumor has the morphology of sex cord-stromal tumor, you should be aware of the possibility of ECSCs. Extensive and comprehensive sampling of specimens can often find focal areas of classical endometrioid carcinoma. The necessary immunohistochemical markers are of positive significance for assisting diagnosis and differential diagnosis.

(4) The "case report" section was re-written according to the guideline of your journal

(5) References had been revised according to your journal style and provided the PMID

REFERENCES

1 Young RH, Prat J, Scully RE. Ovarian endometrioid carcinomas

- resembling sex cord-stromal tumors. A clinicopathological analysis of 13 cases. *Am J Surg Pathol* 1982;**6**:513-522 [PMID: 6890771 DOI: 10.1097/00000478-198209000-00003]
- 2 Ma YH ZQX, Li HX. Ovarian endometrioid adenocarcinoma resembling sex-cord tumors: a clinicopathologic study. *Clin Exp Pathol* 2013;**29**:45-48 [PMID: NA DOI: 10.13315/j.cnki.cjcep.2013.01.014]
 - 3 Wang Q, Zhang HP, Zhuang YL. Ovarian endometrioid adenocarcinoma resembling sex cord-stromal tumor: report of a case. *Zhonghua Bing Li Xue Za Zhi* 2017;**46**:350-351 [PMID: 28468049 DOI: 10.3760/cma.j.issn.0529-5807.2017.05.019]
 - 4 Taylor J, McCluggage WG. Ovarian Sex Cord-stromal Tumors With Melanin Pigment: Report of a Previously Undescribed Phenomenon. *Int J Gynecol Pathol* 2019;**38**:92-96 [PMID: 29140884 DOI: 10.1097/PGP.0000000000000471]
 - 5 Boussios S, Moschetta M, Zarkavelis G, Papadaki A, Kefas A, Tatsi K. Ovarian sex-cord stromal tumours and small cell tumours: Pathological, genetic and management aspects. *Crit Rev Oncol Hematol* 2017;**120**:43-51
 - 6 Young RH. Ovarian sex cord-stromal tumours and their mimics. *Pathology* 2018;**50**:5-15 [PMID: 29198337 DOI: 10.1016/j.critrevonc.2017.10.007]
 - 7 Young RH. Ovarian Sex Cord-Stromal Tumors: Reflections on a 40-Year Experience With a Fascinating Group of Tumors, Including Comments on the Seminal Observations of Robert E. Scully, MD. *Arch Pathol Lab Med* 2018;**142**:1459-1484 [PMID: 29132723 DOI: 10.1016/j.pathol.2017.09.007]
 - 8 Katoh T, Yasuda M, Hasegawa K, Kozawa E, Maniwa J, Sasano H. Estrogen-producing endometrioid adenocarcinoma resembling sex cord-stromal tumor of the ovary: a review of four postmenopausal cases. *Diagn Pathol* 2012;**7**:164 [PMID: 23190574 DOI: 10.1186/1746-1596-7-164]

- 9 Guerrieri C, Frånlund B, Malmström H, Boeryd B. Ovarian endometrioid carcinomas simulating sex cord-stromal tumors: a study using inhibin and cytokeratin 7. *Int J Gynecol Pathol* 1998;**17**:266-271 [PMID: 9656124 DOI: 10.1097/00004347-199807000-00012]

(6) Original figures had been provided in the PPT

(3) Company Editor-in-Chief: I have reviewed the Peer-Review Report, the full text of the manuscript, the relevant ethics documents, and the English Language Certificate, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

Response: All had been done according to reviewers' and editors comments. And thank you very much for your suggestions.