The authors summarize a collection of 67 cases from literature for infllammatory pseudotumor-like follicular dendritic cell sarcoma and submitted as evidence review.
Comments:
1. The diagnosis is almost always confirmed by pathology. Can authors summarize preoperative or pre-biopsy image features that are characteristic for this rare disease entity?
Thanks for your kindly recommendations. There are several cases mentioned image features of this sarcoma. “The abdominal computed tomography (CT) scan showed a well-circumscribed or ill-defined, hypodense mass with weak delayed heterogeneous enhancement after contrast enhancement in the spleen or liver. Some of these lesions reveal irregular areas of nonenhancement related to foci of tumoral necrosis and hemorrhage” has been added in article.

2. The table head of Table 3 "Univariate analyses of factors associations with progression free" is not clear and needs rewriting for grammar check.
“Univariate analyses of factors associations with progression free” has been changed for “Factors evaluated by univariate and multivariate for association with progression free survival”.

3. Table 3 and 4 can be combined into one table
Ok, table 3 and 4 combined.

4. What is the possible explanations for the high recurrence rate (44.9% in 5 years)? Is there any potential adjuvant therapy after surgery? Does liquid biopsy help to choose cancer medications? Could immunotherapy play a role in treatment?
The WHO has noted that data on clinical outcomes are limited, but that the tumor appears to be indolent. Our literature review showed there is a certain risk of relapse after the initial therapy of inflammatory pseudotumor-like FDC sarcoma in 5 years. Only 2 patients who suffered distant metastasis received surgery and chemotherapy (one with 2 cycles of cyclophosphamide, doxorubicin, vincristine and prednisone, and the other with CHOP-based chemotherapy). It is important to find out risk factor of recurrence inflammatory pseudotumor-like FDC sarcoma. But this is a rare tumor, we failed to confirm that age, sex, tumor size or and pathological features are risk factors for disease progression. To the best of our knowledge, liquid biopsy and immunotherapy have not mentioned in these cases.

5. The title misled readers that it is a case collection from the authors' own experiences.
Title will change to “Inflammatory pseudotumor-like follicular dendritic cell sarcoma: literature review of 67 cases”