

Surgical treatment outcomes of primary hepatic sarcomas: A single-center experience

Revision answer

Dear editor and reviewers.

We really appreciate that you gave us the chance to revise the manuscript and submit it to World Journal of Hepatology. The revised expression is highlighted in yellow color in manuscript. Below is the answer to each reviewer's comment. Thank you very much.

Reviewer #1:

Specific Comments to Authors: I read through the manuscript entitled "Surgical treatment outcomes of primary hepatic sarcomas: A single-center experience" written by Kim, et al. with a great interest. Primary hepatic sarcoma is very rare tumor. There is only a few papers reported case series of primary hepatic sarcoma. The authors summarize their experienced cases well. Minor problem They firstly mentioned a total number of the patients is 43, but only nine cases are reported in the paper excluding only laparotomy cases. Change the number of the patients from 43 to nine in the abstract.

⇒ Thank you for your comment. We changed the number of the patients from 43 to nine and modified some expression in abstract.

Reviewer #2:

Specific Comments to Authors: This manuscript is correctly structured and organized, as well as it is written accordingly to the guidelines provided by WJH. Both the tables and figures are clear and well designed. Although the study is retrospective and involves a small number of patients, due to the oddity of this tumor, it offers valuable information which might be useful in the management of this tumor.

⇒ We appreciate your comment.

Reviewer #3:

Specific Comments to Authors: The title adequately reflects the main subject of the manuscript. The summary reflects well the work described in the manuscript. The keywords adequately reflect the focus of the manuscript. The manuscript adequately describes the history and importance of the study. The manuscript describes the focus of the research well but does not explain what was considered to be an early loss from follow-up, for example.

⇒ Thank you for comment. We added a sentence at method paragraph.

"Six early-follow up loss patients who were treated with resection in our center and then transferred to other hospitals were also excluded. Four patients who did not want additional therapy and did not come to outpatient clinic were also excluded."

The research objectives were achieved by the authors and the major contribution of the study was the description of the outcomes and the prognosis of the disease in this service. The manuscript interprets the findings appropriately and appropriately, highlighting the key points in a concise, clear and logical manner. And the findings and their relevance to the literature are presented clearly. The discussion is accurate and discusses the scientific meaning of the article and / or relevance to clinical practice, however only two articles cited as references are current.

⇒ We agree to your comment. We added more current references in discussion.

“Sometimes, it is misdiagnosed as other cystic tumor on pre-operative images and revealed as undifferentiated sarcoma on pathologic review after surgical resection ^[1, 2]”. (published in 2017 and 2020)

“A recent study of 8 patients with R0-resected hepatic angiosarcoma showed median survival and disease-free survival of 59 and 11 months which emphasizes the radical surgical resection is best approach for long-term survival ^[3].” (published in 2019)

“There is a case report of immunotherapy about a patient with primary hepatic angiosarcoma with multiple liver metastasis treated by pazopanib plus PD-1 inhibitor and RAK cells showing stable disease after treatment ^[4] . Although this is only one case report, this study showed a hope of new era of treatment which may aid surgical resection of hepatic angiosarcoma.” (published in 2018, about immune therapy)

The illustrations and tables are sufficient, of good quality and adequately illustrate the content of the article. The manuscript meets the requirements of biostatistics. The manuscript adequately cites references in the introduction and discussion sections however few references were used and only two have less than 3 years of publication.

⇒ The answer is same as above. We added more current references.

The manuscript is well organized and presented in a concise and consistent manner. I did not find the STROBE Declaration - case-control study, observational study, retrospective cohort study - to verify the checklist. The authors sent the related formal ethics documents that were reviewed and approved by their local ethics review committee and the manuscript met the ethics requirements.

⇒ Thank you for comment. Now, we revised the STROBE declaration and attached it to submission site. We added the STROBE statement at the end of manuscript.

1. Manabe Y, Uojima H, Hidaka H, Shao X, Iwasaki S, Wada N, et al. Undifferentiated Embryonal Sarcoma of the Liver Identified after the Initial Diagnosis of a Hepatic Cyst. Intern Med. 2020;59(19):2375-82 [32611966 10.2169/internalmedicine.4853-20]
2. Mori A, Fukase K, Masuda K, Sakata N, Mizuma M, Ohtsuka H, et al. A case of adult undifferentiated embryonal sarcoma of the liver successfully treated with right trisectionectomy: a case report. Surg Case Rep.

2017;3(1):19 [28144858 10.1186/s40792-017-0295-1]

3. Tripke V, Heinrich S, Huber T, Mittler J, Hoppe-Lotichius M, Straub BK, et al. Surgical therapy of primary hepatic angiosarcoma. *BMC Surg.* 2019;19(1):5 [30630447 10.1186/s12893-018-0465-5]

4. Qiao Y, Yang J, Liu L, Zeng Y, Ma J, Jia J, et al. Successful treatment with pazopanib plus PD-1 inhibitor and RAK cells for advanced primary hepatic angiosarcoma: a case report. *BMC Cancer.* 2018;18(1):212 [29466964 10.1186/s12885-018-3996-3]