

Response and Cover Letter for Manuscript no: 66884

Dear Editor,

Thank you taking the time to review our study. We are delighted to know that the journal considers our article worthy of publication.

Considering the insightful comments offered by both yourself and the esteemed reviewer, we have revised our manuscript.

Please see the attached comments in the new manuscript with regards to the changes made in response to your comments. A short summary of the changes are also included in this letter.

Response to Reviewer's comment:

Reviewer #1: A very detailed summary of the uncommon disease. If surgery is not performed based on the radiological findings, what is the best strategy for the follow up of these patients and how the patients are counselled?

Ans: Thank you for your comment. We have added the information in Discussion section.

Page 9,

If surgery is not performed based on the radiological findings, the best strategy for the follow up of these patients and how the patients are counselled require additional consideration. In patients with underlying malignancies, the follow-up interval could be in line with the current schedule. As for incidental cases, 6-month or 12-month follow-up imaging is recommended^[13]. The changing nature of tumor in images or clinical presentation should initiate a surgical re-evaluation. However, if patients do not feel reassured after counselling, an individualized decision of a short-interval follow-up recommendation or a direct referral to a surgeon is also justified.

Reference 13. Heller MT, Harisinghani M, Neitlich JD, Yeghiayan P, Berland LL. Managing incidental findings on abdominal and pelvic CT and MRI, part 3:

white paper of the ACR Incidental Findings Committee II on splenic and nodal findings. *J Am Coll Radiol* 2013; **10**(11): 833-839 [PMID: 24183552 DOI: 10.1016/j.jacr.2013.05.020]

Editorial Office's comments

Science Editor: 1. Scientific quality: The manuscript is a retrospective cross sectional and descriptive case control study regarding sclerosing angiomatoid nodular transformation (SANT) and the role of splenectomy in patients with SANT. The authors reviewed 20 cases with splenectomy for splenic tumor and 3 patients had SANT. The authors define the radiologic and clinical characteristics of the newly defined disease. The topic is within the scope of the WJG. (1) Classification: Grade B (By the reviewer ID: 05290162).; (2) Summary of the Peer-Review Report: The authors defined the radiologic, clinical and gross pathologic definition of the uncommon disease. They have performed a very diligent work and the manuscript is well written. The comments of the reviewer ID: 05290162: a) If surgery is not performed based on the radiological findings, what is the best strategy for the follow up of these patients and how the patients are counselled? **This point should be addressed by the Authors.**

Ans: Thank you for your comments. We had addressed this point as above.

(3) Format: There are 4 figures and 3 tables (4) References: there are 20 references and all of them is within the last ten years. (5) Self-cited references: There are no self-citations. (6) References recommendations: There are no reference suggestions nor any conflicts regarding this section. 2. Language evaluation: Classification: Grade A. The authors have provided non-native speaker English editing certificate by filipodia but is a certificate regarding different studies. Therefore, **it should be provided by the authors.**

Ans: Thank you for your comments. We had updated the certificate.

3. Academic norms and rules: The Biostatistics Review Certificate is submitted by the authors which is statement that says the co-author (CMH, second coauthor)) has checked the study in terms of statistical misconduct. **The signed Conflict-of-Interest Disclosure Form and Copyright License Agreement is not provided but is necessary.**

Ans: Thank you for your comments. We had provided the signed documents. The Institutional Review Board Approval Form is required and is submitted by the authors. No academic misconduct was found by the Google/Bing search (Accessory information is at the end of the report; the screenshot of the google search is provided). 4. Supplementary comments: The disease is a

rare disease and the presentation of the case series is very well written. However, I could not see any description about the statistic section of the study. So please provide the statistical analysis section even if this is a descriptive study.

Ans: Thank you for your comments. Statistical analysis section was added in the Methods section.

Page 3,

Statistical analysis

Descriptive statistics were used to summarize the characteristics (frequency distribution, central tendency, and variation) of the dataset. Data are presented as mean, median, range, or percentage when appropriate. Analyses were performed using the Statistical Package for Social Sciences (SPSS)® version 21.0 (SPSS Inc., Chicago, IL, USA).

Furthermore, in the materials and methods section please provide the total number of splenectomies performed during this period than proceed with the 20 splenectomies sue to splenic tumors.

Ans: Thank you for your comments. We had added the number in the methods section.

Page 3,

We retrospectively reviewed 20 hospitalized patients who underwent splenectomy at the National Taiwan University Hospital in 2018 and 2019. Six patients were excluded from the study because the indications for splenectomy were not the presence of tumors. Fourteen eligible patients were further divided into SANT and non-SANT groups based on the histopathological diagnosis.

5. Issues raised: (1) The key words are appropriate (2) The language classification is Grade B. Please visit the following website for the professional English language editing companies that we recommend:

<https://www.wjgnet.com/bpg/gerinfo/240>; (3) The title is appropriate (13 words); (4) The “Author Contributions” is appropriate. (5) Grant application information is not necessary (6) The authors provided original pictures. (7) PMID and DOI numbers are presented according to the guidelines of the journal; (8) The “Article Highlights” section is missing. Please add the “Article Highlights” section;

Ans: Thank you for your comments. “Article Highlights” section was added in Page 11 and 12.

Article highlights

Research background

Clinicians are not familiar with the sclerosing angiomatoid nodular transformation (SANT), which is gaining recognition as a benign splenic tumor.

Research motivation

We challenge that SANT is rare and whether critical imaging review could help avoid unnecessary splenectomy.

Research objectives

This study aimed to evaluate the incidence of SANT among splenic tumors and the decision-making process of SANT management.

Research methods

Twenty hospitalized patients who underwent splenectomy in 2018 and 2019 in a tertiary university hospital were retrospectively reviewed. Discriminative features differentiating SANT from other non-SANT splenic tumors were descriptively analyzed.

Research results

Fourteen splenectomies were indicated for splenic tumors, including 3 SANTs (21%). Hypointensity on T2-weighted magnetic resonance imaging, spoke wheel enhancing pattern, and cold spot in positron emission tomography scan helped establish the diagnosis of SANT. Splenectomy need not be performed in patients with typical imaging features of SANT.

Research conclusions

SANT is not a rare. Splenectomy should not be routinely indicated as the only management option for SANT with typical imaging features.

Research perspectives

Further studies are needed to confirm the diagnostic imaging features of SANT in the future.

(9) The manuscript is written according to the guidelines of the journal with the necessity of minor revisions; (10) Figures are appropriate, and no copyright transfer is required is required. 6 Re-Review: Required after the revisions required by the reviewer. 7 Recommendation: can be published after minor revision. Accessories to the report: The screen shot of the search topic in Google.

Ans: Thank you for your comments.

We hope that the changes have addressed most of your comments and that it is considered suitable for publication.

Best Wishes,
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