

Answering Reviewers

Dear Editors and Reviewers:

Thank you for your letter and the editor's and reviewers' comments on our article entitled "15-Year Follow-up of Patients with Schwannomatosis: A Case Report". These opinions are of great value to the revision and improvement of our thesis. I have carefully responded to the comments and revised them in my re-submitted article.

We would like also to thank you for allowing us to resubmit a revised copy of the manuscript. We hope that the revised manuscript is accepted for publication in the World Journal of Clinical Cases.

Yours sincerely,

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Reviewer #1:

1. The present case study reported a schwannomatosis patient who was followed up for fifteen years. The topic is interesting and the manuscript although well-written, the authors failed to show the

novelty in their work.

Response: Thank you very much for reading my article and giving valuable comments. It's true that I didn't highlight the innovations in the beginning, which made my article seem unnovel, but I've changed it. According to the long-term follow-up results, combined with the characteristics of the disease itself, from the psychological perspective of patients, talking about anxiety and depression will lead to delays in treatment, often bring irreversible consequences to patients, warning readers when we treat the disease, also can not ignore the psychological and spiritual treatment of patients.

2. Please clarify the innovation in your case presentation. When I search “schwannomatosis” in PubMed, there comes out to be more than 400 search results.

Response: Although there are many cases of schwannomatosis reported on PubMed, no long-term follow-up and follow-up of schwannomatosis has been found by other authors. The innovation of this paper is that the disease was further analyzed based on the long-term follow-up process of 15 years and the choice of surgical timing from the psychological perspective of patients. Because schwannomatosis is frequent and relapsing, patients need to undergo multiple surgical treatments during their lifetime, which also carries more surgical risks. Tumor tissue on the nerve oppression, the patient's body has suffered pain for a long time, for patients with psychological and physical double blow, which often cause serious

psychological disorders, depression and anxiety, leading to some patients lose confidence in treatment or give up treatment. However, the choice of surgical timing is crucial. Early surgery and early relief of spinal cord and nerve compression from tumor tissue can preserve limb function to the greatest extent and improve the quality of life. Therefore, for patients with multiple schwannomatosis, we cannot ignore psychological treatment. Only by maintaining patients' mental health and actively cooperating with treatment can we accurately grasp the timing of surgery, prevent irreversible damage to the nervous system, and improve the quality of life and survival rate of patients.

3. I recommend the authors to collate all the related cases reported in the literature and list a table to demonstrate the rarity of schwannomatosis.

Response: According to your suggestion, I also reviewed the reports and epidemiological studies on schwannomatosis and made a table to demonstrate the rarity of schwannomatosis as follows:

Disease types	Schwannomatosis
Regional prevalence	1 / 126315
Estimated birth incidence	1 / 68956
Age of diagnosis	15-66 years old
Mortality rate	14%
SMARC1	25%

LZTR1	16%
NF2	9%
No pathogenic variant found	15%

REFERENCES

- 1 **Evans DG**, Bowers NL, Tobi S, Hartley C, Wallace AJ, King AT, Lloyd SKW, Rutherford SA, Hammerbeck-Ward C, Pathmanaban ON, Freeman SR, Ealing J, Kellett M, Laitt R, Thomas O, Halliday D, Ferner R, Taylor A, Duff C, Harkness EF, Smith MJ. Schwannomatosis: a genetic and epidemiological study. *J Neurol Neurosurg Psychiatry* 2018; **89**: 1215-1219 [PMID: 29909380 DOI: 10.1136/jnnp-2018-318538]
- 2 **Ferner RE**, Bakker A, Elgersma Y, Evans DGR, Giovannini M, Legius E, Lloyd A, Messiaen LM, Plotkin S, Reilly KM, Schindeler A, Smith MJ, Ullrich NJ, Widemann B, Sherman LS. From process to progress-2017 International Conference on Neurofibromatosis 1, Neurofibromatosis 2 and Schwannomatosis. *Am J Med Genet A*. 2019 Jun;179(6):1098-1106. doi: 10.1002/ajmg.a.61112. Epub 2019 Mar 25. PMID: 30908866; PMCID: PMC6488427.

Reviewer #2:

Dear author, thank you for submitting your long follow up as a case report.

Response: Thank you for your evaluation and recognition of the article. We will continue to follow up this case and hope to obtain more valuable information for readers in the future.

Reviewer #3:

1. The authors in their study reported a rare case of NF type 3 with long term follow up: their diagnosis is confirmed and their message was obvious to the readers . They also reported patient family members with same pathology.I recommend them to followed them carefully with psychological support from pschatry consultants to avoid the poor outcome of their patient who gave up his close follow up and surgeries although.

Response: Thank you for your comments and suggestions, which are very valuable. During the follow-up period, we provided psychological guidance and treatment for patients. At the beginning, I did not give much description of this part, but now I have revised the article and added this part, which will make this chapter more concrete and substantial.

2. the patology of his tumors is a benign and can bee treated surgically with smooth post operative course I recommend to add a review of literatures for previously published cases It will add to the strength of their article.

Response: According to your suggestion, we conducted a literature review. I have improved the contents of the manuscript through the newly reviewed literatures, and further supplemented the pathogenesis, clinical manifestations, treatment methods, including the choice of surgical timing and psychological treatment of schwannomatosis.

Reviewer #4:

Schwannomatosis is a rare but well-described syndrome characterized by multiple peripheral nerve schwannomas usually without involvement of the vestibular nerve and can be sporadic or familial in nature. The authors provided an excellent presentation of the schwannomatosis patient, which allows me to recommend the manuscript for publication in the World Journal of Clinical Cases. I'm only advising authors to revise the "CONCLUSION" section.

Response: Thank you for your comments and suggestions on the article. I have revised the conclusion. As follows:

CONCLUSION

Here, we report a rare case of schwannomatosis. We also conducted 15 years of patient follow-up and treatment, and analyzed the timing of surgery and patient psychology. This case will further increase our overall understanding of the diagnosis and treatment of this rare tumor.

We appreciate for Editors and Reviewers' warm work earnestly and hope that the correction will meet with approval.

Once again, thank you in advance for your time and effort dedicated to the matter.