

Response to Reviewers

- ⇒ **This is a response to reviewers for the manuscript “Different intraoperative decisions for undiagnosed paraganglioma: A report of two cases”. We appreciate the reviewers’ sincere criticism.**
- ⇒ **We have answered all the questions of reviewers, and we have revised our manuscript according to the reviewers’ recommendations.**

Manuscript NO.: 77792: Different intraoperative decisions for undiagnosed paraganglioma: A report of two cases

World Journal of Clinical Cases

Comments from the Editors and Reviewers:

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Very interesting clinical topic illustrated in two case reports; the authors should underline in the introduction and discussion sections of the manuscript the fundamental role of diagnostic imaging to non-invasively and pre-operatively characterize such chromaffin-tissue tumors in order to appropriately prepare patients for surgery using adequate medical treatment; for this purpose, the authors should underline the role of magnetic resonance imaging as well as that of functional radionuclide scanning using MIBG and/or somatostatin analogs; in this regard, the authors should cite the following papers:

1. Maurea S, Caracò C, Klain M, Mainolfi C, Salvatore M. Imaging characterization of non-hypersecreting adrenal masses. Comparison between MR and radionuclide techniques. Q J Nucl Med Mol Imaging. 2004 Sep;48(3):188-97. PMID: 15499292. 2. Maurea S, Cuocolo A, Reynolds JC, Neumann RD, Salvatore M. Diagnostic imaging in patients with paragangliomas. Computed tomography, magnetic resonance and MIBG scintigraphy comparison. Q J Nucl Med. 1996 Dec;40(4):365-71. PMID: 9050342. 3. Lastoria S, Maurea S, Vergara E, Acampa W, Varrella P, Klain M, Muto P, Bernardy JD, Salvatore M. Comparison of labeled MIBG and somatostatin analogs in imaging neuroendocrine tumors. Q J Nucl Med. 1995 Dec;39(4 Suppl 1):145-9. PMID: 9002775.

⇒ **We appreciate the reviewer's sincere criticism and great references!!**

⇒ **As the reviewer recommended, we have added some description about the fundamental role of diagnostic imaging including MRI and functional radionuclide scanning with the reviewer's three references in discussion section as below:**

⇒ **“When an adrenal or retroperitoneal mass without clinical symptom is incidentally detected, results of imaging studies may sometimes indicate the need for biochemical screening for catecholamine-producing tumors. Therefore, previous images should be interpreted with caution, taking into consideration of additional imaging studies. For example, degree of attenuation on unenhanced CT images [9, 10] or signal intensity on T2-weighted magnetic resonance (MR) images [11, 12] of the mass could provide presumptive criteria to characterize production of catecholamine. Functional imaging such as scintigraphy with metaiodobenzylguanidine (MIBG) or positron-emission tomography (PET) scanning is also effective in localizing metastatic disease or multiple paragangliomas [13-15].”**

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Good topic

⇒ **We appreciate the reviewer's positive feedback about our topic.**