

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This article reports a case of Primary peritoneal hemangioendothelioma with a good prognosis after surgical treatment. In the discussion part of this paper, the differentiation points of the disease in pathology and histopathology are discussed. Thank you for your comments.

It is suggested to supplement the pathological and immunohistochemical pictures of this case, especially myxohyaline Stroma, central area of necrosis, vessels of various dimension, intense chronic inflammation with lympho-monocytoid cells, Plasma -cells, hystiocytes filled with Hemosiderin, etc.

Thanks for your interesting suggestion. As you rightly requested, we have enriched the article with the histopathological figure of the surgical specimen (please see Figure 2, A-F) with its caption and added a detailed description in the text ("Definitive histological and immunohistochemistry examination demonstrated a primitive peritoneal hemangioendothelioma which consisted of a vascularized proliferation of blood vessels associated with involutive aspects and necrosis (Figure 2).")

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Dear Authors, you presented an interesting case of a rare peritoneal tumor and a well-written manuscript. There are some points that need to be clarified or modified, according to my opinion.

Please pay attention to the following questions and queries:

Line 41: and examinations, please correct us such.

Line 41 and Line 163: that can be made only histologically, please correct us such.

Line 48: please provide the abbreviation EHE also in the introduction.

Line 73: abdominal computed tomography (CT) examination, explain the abbreviation CT.

Line 75: abdominal magnetic resonance imaging (MRI), please explain the abbreviation MRI.

Thank you very much for all these right corrections. We have edited all the lines above as per your suggestion.

Lines 73-76: obviously there was an hypervascularisation of the mass. Was there any attempt to use contrast media in order to evaluate the vascular enhancement of the mass during the CT and/or MRI imaging?

Thank you for your right observation. Yes, contrast-enhancement CT scan was performed and showed mild delayed enhancement of the mass. We have added this finding in the text.

Lines 80-83: histological figures of your findings are highly suggestive at this point. Please provide them if available.

As you requested, we have provided the article with the histopathological figure of the surgical specimen (please see Figure 2, A-F).

Lines 140 and Line 144: the abbreviation EH is probably the abbreviation EHE. Please correct. Thank you. Changed according to reviewer suggestions.

(2) *Company editor-in-chief:*

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Obstetrics and Gynecology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

Dear Editor-in-chief, thank you for your valuable comments. We appreciate your effort to improve our paper in view of a possible publication in *World Journal of Obstetrics and Gynecology*.

Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

Thanks for your clear explanation. We confirm that all the two figures are original. We have prepared a figure PowerPoint file addressing these indications.

Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Thank you again. We have edited the Table 1 according to the requested format.

Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by"

should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

Dear Company editor-in-chief, we thank you very much for suggesting us this valuable tool. As you indicated, we performed a keyword research in RCA database and analyzed the results obtained once ranked by "impact index per article".

Three important articles were already present in our reference list (see references #1: Sardaro A. et al, #2: Rosenberg A. et al and #33: Stacchiotti S. et al), while we proceeded to insert the following articles in the text, to make it implemented and improved.

Here the references we have added along with their updated number in the references list:

22. **Shiba S**, Imaoka H, Shioji K, Suzuki E, Horiguchi S, Terashima T, Kojima Y, Okuno T, Sukawa Y, Tsuji K, Umemoto K, Asagi A, Todaka A, Ueno M, Ikeda M, Morizane C, Furuse J. Clinical characteristics of Japanese patients with epithelioid hemangioendothelioma: a multicenter retrospective study. *BMC Cancer* 2018; **18**:993 [PMID: 30340559 DOI: 10.1186/s12885-018-4934-0]

23. **Epelboym Y**, Engelkemier DR, Thomas-Chausse F, Alomari AI, Al-Ibraheemi A, Trenor CC 3rd, Adams DM, Chaudry G. Imaging findings in epithelioid hemangioendothelioma. *Clin Imaging*. 2019; **58**:59-65 [PMID: 31238187 DOI: 10.1016/j.clinimag.2019.06.002]

30. **Wu X**, Li B, Zheng C, Hong T, He X. Clinical characteristics of epithelioid hemangioendothelioma: a single-center retrospective study. *Eur J Med Res* 2019; **24**:16 [PMID: 30819247 DOI: 10.1186/s40001-019-0375-8]