POINT-BY-POINT RESPONSE

Name of journal: World Journal of Gastroenterology

Manuscript NO: 85735

Title: Carcinoid syndrome caused by a pulmonary carcinoid mimics intestinal

manifestations of ulcerative colitis: a case report

Changes of the original text are indicated by yellow markings in the revised version of

the manuscript.

REVIEWER 1

Comment 1 by reviewer 1:

"I have only one comment for the paper: it would be more perfect that if the authors could discuss about the potential mechanism for the pulmonary carcinoid induced ulcerative colitis".

Response to comment 1:

In fact, we did not specify a potential mechanism for the induction of ulcerative colitis symptoms in the manuscript. We thank the reviewer for pointing this out. We explain this in the text as follows:

"After complete resection of the pulmonary carcinoid, the intestinal symptoms completely subsided with no need for further therapy even after three years of follow up. The presence of a 56 mm measuring pulmonary carcinoid suggests (Russ et al., Clin Lung Cancer 2022) that the carcinoid was already present at the time of the patient's ulcerative colitis diagnosis [...] Interestingly, studies in mice have shown that serotonin increases the susceptibility to experimental colitis (Haq et al., Sci Adv 2021)"

REVIEWER 2

Comment 1 by reviewer 2:

"Carcinoid syndrome caused by a pulmonary carcinoid mimics intestinal manifestations of ulcerative colitis is rare case. The pulmonary carcinoid requires surgery".

Response to comment 1:

The reviewer is correct that surgical resection is the treatment of choice for pulmonary carcinoid. We now write in the discussion that surgical resection is the treatment of choice as follows:

"Surgery has been reported to provide a 5- and 10-year survival rate of >90% for typical pulmonary carcinoids and is the treatment of choice".