

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: well written a case report on monkeypox virus. Did the authors evaluate the other sexual transmitted disease on this case? Such as HPV, and Chlamydia.

Response: Thank you for your comment. We did evaluate for other sexually transmitted disease including Chlamydia, Gonorrhea, HSV which were all negative. HPV was not done after his rectal swab was confirmatory of Monkey Pox. I have included a comment on the revised manuscript on that.

Reviewer #2:

Scientific Quality: Grade E (Do not publish)

Language Quality: Grade A (Priority publishing)

Conclusion: Rejection

Specific Comments to Authors: This manuscript was a rare case with both with Monkeypox and HIV/AIDS with MSM. However, endoscopic appearance and pathological examination of rectal mass were not presented. Major comments: It is important to describe the pathophysiological of rectal mass. Some cases with HIV infection shows GI tract mass such as Caposi's sarcoma or lymphoma. Tissue swab for MPX DNA PCR was positive in the results. Which tissue swab was positive for MPX? Is it possible for the author to present another image information?

Response: Thank you for your comment. Endoluminal examination was not done due to the risk of perforation as it outweighs the benefit on his initial presentation. I have included an axial image (Figure D) as requested in addition to the coronal CT image to provide a different perspective of the severity of obstruction and near occlusion. Kaposi Sarcoma and lymphoma are possible differentials here but is CT imaging was not consistent with significant lymphadenopathy to consider lymphoma. Secondly, most of our GI Kaposi Sarcoma presents more with rectal bleeding or melena depending on the location. Nevertheless, these were possibilities. Endoluminal evaluation was highlighted as a limitation in the discussion.

Reviewer #3:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: In a post-COVID19 era where there is significant interest in MPX, this case report provides us with valuable information. While MPX is commonly known to manifest as a dermatological condition, the fact that it can present as proctitis or progress to an anal mass is intriguing. It would have been helpful from the colonoscopist's perspective to have sigmoidoscopy findings or histological examination results, but unfortunately, they were not performed due to the patient's condition. Thank you for sharing this fascinating paper

Response: Thank you for your comment. Endoluminal evaluation by either flexible sigmoidoscopy or colonoscopy would have been excellent in this circumstance. Unfortunately, as noted it was not done as it would have given a different perspective to the imaging and histological presentation. It was a procedure planned but given consideration of the risk and benefit at the initial presentation and rapid progression of his symptoms, it was not done. This was also highlighted as a limitation in the discussion.