Reviewer #1:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors:

Clinical information is lacking : - There is no information if the lesion was an isolated recurrence, whether the patient had other sites of disease.

Response: information was added in Imaging examinations

- Please describe the surgical pathology finding, what was observed at surgery time, how the operation proceeded, what were the pathology margins. See for example Operative Report

https://training.seer.cancer.gov/abstracting/procedures/operative/example/ex4.html -Response: information was added in TREATMENT

Describe how the patient recovered from the surgery.

Response: information was added in OUTCOME AND FOLLOW-UP

Post-operatively : what imaging were done ?

Response: information was added in OUTCOME AND FOLLOW-UP

What were patient's symptoms ?

Response: information was added in History of present illness

Did the patient receive further therapy ? -

Response: information was added in OUTCOME AND FOLLOW-UP

What is the last date of consultation, status of the patient, number of days or weeks since surgery.

Response: information was added in OUTCOME AND FOLLOW-UP

The discussion and conclusion bear no relevance to the case report. The discussion and conclusion should evaluate how the patient's actual management match or not-match the literature. Conclusion should mention what was important in this case report, for example importance of the surgical resection of a metastatic recurrence.

Response: The discussion and conclusion were revised.

Reviewer #2:

Scientific Quality: Grade D (Fair) **Language Quality:** Grade B (Minor language polishing) **Conclusion:** Minor revision

Specific Comments to Authors:

The argument is quite interesting for its rareness I personally agree with the leading management, but I'd suggest a deeper meditation on the radiological contribution in order to achieve a presuntive diagnosis of pancreatic metastatic cancer, since the patient has been operated without any preventive diagnosis. The discussion about chemotherapy is less interesting since the well-known ineffectiveness of this treatment

Response: The discussion and conclusion were revised to focus on surgery.

Reviewer #3: Scientific Quality: Grade D (Fair) Language Quality: Grade B (Minor language polishing) Conclusion: Rejection Specific Comments to Authors: The context could have been more orgainized. Response: The context was revised to be organized.