

Dear editor:

Thank you for your comments of 45608(Thoracotomy of an asymptomatic functional posterior mediastinal paraganglioma: a case report),Here are my responses to the reviewers' comments.

Reviewer 1

Comment 1: The authors are strongly encouraged to have the manuscript read for grammatical correctness by someone with more adequate skills in the English language.

Answer:Yes,thank you,I have asked the professional English language editing companies for polishing my manuscript.

Comment 2: The patient's clinical information can be presented in the tables.

Answer:Yes, I have rewritten this part and the patient case presentation was descriptive, organized chronologically, accurate, salient, and presented in a narrative form.

Comment 3: A long-term follow-up visit, such as 1 year is suggested.

Answer:Yes, This have been added into the paper.

Comment 4: Epidemiological information of Paraganglioma in Chinese population should be discussed in the revision text.

Answer:Yes,I have searched involved artical about the epidemiology in Chinese population but I didn't find the exact number about it.

Comment 5: Treatment options and effects of large-scale research also should be listed.

Answer:Yes,I have reviewed the literature about these and added into the paper.

Reviewer 2

Comment: Novelty should be evidenced by new cases. "Haruaki Hino,

et al. Paraganglioma of the posterior mediastinum: Report of a case. The Journal of the Japanese Association for Chest Surgery. 2011;25(6):73-77”

Answer: Thank you ,I have read this artical and found that it was a Japanese version,but from the abstract,this Japanese case was different from our case,first,our patient was diagnosed as asymptomatic functional posterior mediastinal paraganglioma,which was extremly rare;second,the tumor in our case was much bigger,therefore we choosed to performed by thoracotomy instead of thoracoscope.