
Dear Professor Wang and reviewers,

On behalf of my co-authors, we thank you very much for giving us an opportunity to revise our manuscript, we appreciate you very much for your positive and constructive comments and suggestions on our manuscript entitled “Histopathological characteristics of needle core biopsy and surgical specimens from patients with solitary hepatocellular carcinoma (HCC) or intrahepatic cholangiocarcinoma(ICC) ” (ID: 45516).

We have studied reviewer’s comments carefully and have made revision. We have tried our best to revise our manuscript according to the comments. Attached please find the revised version, which we would like to submit for your kind consideration.

We would like to express our great appreciation to you and reviewers for comments on our paper. Looking forward to hearing from you.

Thank you and best regards.

Yours sincerely,

Ning Li

Response to the reviewers:

Reviewer #1 (Reviewer's code: 03645030) has the following two questions about the problems in our manuscript. We will respond to the comments of the reviewer one by one:

1) The references seem not very updated. Please update the references list.

Response: We accept suggestions of this reviewer, and the corresponding references have been updated.

2) A minor language editing is required.

Response: We accept suggestions of this reviewer, and language has been retouched and edited.

According to the Reviewer #2's (Reviewer's code: 02992809) suggestions, five major points are listed:

1) The tables 3-5 should be re-organized and the structure of those tables seems not very clear.

Response: These tables were re-organized, and the data lost in the original format editing was replenished.

2) The titles seem too long, and the abstract should be revised according to the guideline of the journal.

Response: The title of the paper has been condensed. The abstract has been re-edited according to the guideline of this journal.

3) Are there any data about the follow up?

Response: All enrolled patients were followed up. However, the evaluation of the prognosis of patients is not the main purpose of this paper, so it is not reflected in this work.

4) And how about the limit of this study?

Response: There were some limitations in this study. Even with the aid of the 4-tier based binary classification, 0.48% (1/208) patients were misdiagnosed as preoperative NCB in this cohort, which indicated that the utility of the three markers in NCB had

diagnostic limitations and that the combined utility of other biomarkers would be necessary to further improve the diagnostic accuracy. In addition, this study also does not address potential adverse events following NCB. Third, the present study investigated the concordance of detective indexes in patients with a solitary tumour between NCB and SS. The degree of consistency of the indicators in patients with a multifocal tumour between NCB and SS necessitates further investigation, which will be the focus of our future studies.

5) Some minor language polishing should be corrected.

Response: We accept suggestions of this reviewer, and language has been retouched and edited.

Reviewer #3 (Reviewer's code: 03003965) has the following one questions about the problems in our manuscript.

1) A minor revision of the language is required.

Response: We accept suggestions of this reviewer, and language has been retouched and edited.