## One-to-One responses to the comments

We kindly appreciated the comments and suggestions from the reviewers. We have considered those carefully and made the changes of our manuscript in accordance. The one-to-one explanations to address each issue in the revised manuscript are shown as below. We copy all the original comments and write our responses in Italic after each comment for your convenience.

## **Reviewer 1:**

The case report titled "Foreign body granuloma in the tongue differentiated from tongue cancer: Case report" is a well written report on a case of tongue enlargement. There are good quality images and photos added to the text. This report is worth publishing for differential diagnosis of tongue enlargements. I suggest the authors indicate which kind of mesanchymal tumor (lymphoma, hemangioma and etc.) is in the differential diagnosis of this lesion. As you know the most common tongue cancer is SCC which presents as a rough surface mass or ulcer.

**Response:** Thanks for the suggestions. We have added the corresponding content and the necessary references in the first paragraph of Discussion Section, shown as follows.

In this case reported, the differential diagnosis of an irregularly shaped nodule with smooth surface includes cavernous hemangioma, anaplastic large cell lymphoma, endophytic squamous cell carcinoma and Kaposi sarcoma of the tongue.

In addition, although the reviewer mentioned that "the most common tongue cancer is SCC which presents as a rough surface mass or ulcer", we reviewed two articles in which it was believed that the most common tongue cancer was SCC endophytic growth, with the ratio 52.7% and 83.6% respectively [1, 2]. Hence, we cautiously added endophytic SCC in the differential diagnosis.

## **Company editor-in-chief:**

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before its final acceptance, the author(s) must provide the Signed Consent for Treatment Form(s) or Document(s). Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. Please upload the approved grant application form(s) or funding agency copy of any approval document(s).

**Response:** Thanks for the tips. We will submit all of the relevant documents, following the steps of submitting the revised manuscript.

- 1. Tang W, Wang Y, Yuan Y, Tao X. Assessment of tumor depth in oral tongue squamous cell carcinoma with multiparametric MRI: correlation with pathology. Eur Radiol. 2022;32(1):254-61 [PMID: 34255162 DOI: 10.1007/s00330-021-08148-6]
- 2. Spiro RH, Guillamondegui O, Jr., Paulino AF, Huvos AG. Pattern of invasion and margin assessment in patients with oral tongue cancer. Head Neck. 1999;21(5):408-13 [PMID: 10402520 DOI: 10.1002/(sici)1097-0347(199908)21:5<408::aid-hed5>3.0.co;2-e]