Reviewer #1:

Specific Comments to Authors: The manuscript titled "Congenital ovarian anomaly manifesting as extra tissue connection between the two ovaries: a first case report in the English literature" by Myeong Gyun Choi, it is very interesting and innovation, it can be accepted before minor revision.

→Thank you for your review and comment

Reviewer #2:

Specific Comments to Authors: The authors reported an interesting case of an ovarian anomaly that manifested as a rectangular ovarian tissue bridging the distance between the left and right ovaries. I have never seen something similar before, and the authors did a very good job of documenting this malformation with high-quality figures. The manuscript is well-written and the case is well-presented. However, I have some minor comments:

- 1) In the abstract (line 37): please write "ovarian anomalies" instead of "ovary anomalies".
- → Thank you for your comment. We wrote "ovarian anomalies" instead of "ovary anomalies".
- 2) In the core tip (line 59): please avoid the redundancy in the following phrase: "a rare case of a rare ovarian anomaly". You can write " a case of a rare ovarian anomaly" instead.
- → Thank you for your comment. We wrote "a case of a rare ovarian anomaly" instead of "a rare case of a rare ovarian anomaly".
- 3) In the introduction (line 71): I could not understand how congenital ovarian agenesis could result from torsion. I found the phrase misleading and unclear. Please revise the section about unilateral ovarian agenesis in the introduction.
- → Thank you for your comment. We revised the section about unilateral ovarian agenesis. "Congenital unilateral ovarian agenesis in a normal female is extremely rare and usually asymptomatic. It may be accompanied by ipsilateral renal or ureteric agenesis and/or ipsilateral malformation of the fallopian tube. The etiology of unilateral ovarian agenesis has yet to be elucidated. The two most likely causes of unilateral ovarian agenesis include an asymptomatic torsion of ovary with consequent organ ischemia and reabsorption, or a defect in the development of the Mullerian and gonadal structures underlying vascular anomalies"
- 4) In the treatment section (line 104): please provide additional details on the surgical resection of the extra ovarian tissue. What power did you use (bipolar cauterization, plasma energy, CO2 laser, cold scissors), and did you pay attention to avoid injuring the normal ovaries while resecting the additional ovarian band?
- → Thank you for your comment. We set the margin of both ovaries to avoid injuring the normal ovaries, and ligated both ends of extra tissue. Then tissue was excised and removed. We added additional details on the treatment section.

- 5) In the follow-up section (line 111): did you do a color Doppler sonography to assess the ovarian vascularization after the surgery? Did you measure the serum AMH level?
- → Thank you for your comment. We did post operative ultrasonography 2 weeks after cesarean section and identified normal ovary and uterus. We didn't do color doppler and check serum AMH level.
- 6) The written language requires revisions. It contains a lot of grammatical faults. I suggest having the manuscript revised by someone fluent in English or a native English speaker.
- → Thank you for your comment. We have received correction from a professional English correction company, and we will attach the certificate on the next page.

Reviewer #3:

Specific Comments to Authors: Thank you for addressing such a rare case of extra ovarian encircling tissues around the uterus. It's well written manuscript with an interesting photos.

My question is Have you checked for any extra ovarian tissues in the abdomen because you can't explore the abdomen through a small pfannenstiel incision .

→ Thank you for your comment. We explore the lower abdomen as detatiled as possible to check for extra ovary tissues and any other malformation such as renal anomalies, but there were no specific findings.

There was limit to exploration in Pfannenstiel incision, therefore we could not explore the whole abdomen.

Are you sure that you sent the biopsy from this band or you've include a part of the ovary.

→ Thank you for your comment. We set the margin of both ovaries to avoid injuring the normal ovaries, and ligated both ends of extra tissue. We paid attention to avoid injuring normal ovaries but it is possible that normal ovary tissue was included.

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Manuscript Authors:

Jong Woon Kim

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