

Revision: (ID: 70529)

Journal: *World Journal of Clinical Cases*

Chidamide combined with CHOPE regimen to treat primary cutaneous aggressive epidermotropic CD8+ cytotoxic T-cell lymphoma: a case report

November 10, 2021

Dear Editors and Reviewers:

On behalf of my co-authors, we thank you very much for your kind efforts and constructive comments on our paper submitted to *World Journal of Clinical Cases* (ID: 70529). We have carefully revised the manuscript in accordance with your kind advice and here are our replies to the remarks.

A clean revised manuscript has been resubmitted simultaneously with the current response letter. And a marked-up copy with the changes highlighted also has been submitted as supplementary material. The followings are point-by-point responses to the comments.

Reviewer #1:

The authors present a case report of a novel treatment for a rare type of T-cell lymphoma. The case description is adequate and accompanied by good quality photographs of the patient before and after treatment. The introduction and discussion are informative in reviewing the current literature on epidermotropic T-cell lymphoma. Writing in the english language needs further reviewing, and parts of the manuscript could be edited for clarity.

1. on page 3, line 13, you could write simply "skin biopsy".

Response: Thank you so much for your constructive advice. We fully agree with you. We have carefully modified the original text according to your suggestions. We have changed the expression of "skin pathological biopsy" to "skin biopsy" in the original text. The revised contents have been highlighted in the revised manuscript and attached as follows:

skin biopsy. (First paragraph in *CASE SUMMARY* part, page 3, line 13)

2. on page 3 line 14, the sentence that starts with "the patient was diagnosed..." feels redundant as the result of the biopsy has just been presented, and could be removed from the text.

Response: Thank you so much for your constructive advice. We can't agree more with your advice. We have carefully modified the original text according to your suggestions.

The sentence that starts with "the patient was diagnosed..." has been deleted from the original text by us. (First paragraph in *CASE SUMMARY* part, page 3, line 14)

3. Throughout the text, many dates are provided for key events. It would be preferable to suppress these dates and describe the events in relation to the time that had passed from symptom onset (e.g. three years after the onset of the symptoms).

Response: Thank you so much for your constructive advice. We can't agree more with your advice. We have carefully modified the original text according to your suggestions.

We revised the original text to hide the dates of many key events. Only the time of the first symptom was left to facilitate us to assess the patient's survival time. The revised contents have been highlighted in the revised manuscript and attached as follows:

Up to date, the patient has been disease-free for 3 years. (First paragraph in *CASE SUMMARY* part, page 3, line 22)

The patient had generalized erythema, papules, blisters with itching since Aug 18, 2017. Three days after the onset of symptoms, some blisters formed blood blisters with tan crusts on the surface, accompanied by pain, and fever, fear of cold, and chills, with a maximum body temperature of 41 °C. (First paragraph in *History of present illness* part, page 6, line 5)

The patient was diagnosed more than 20 days after the onset of symptoms, and chidamide combined with CHOPE regimen was used for the patient's first cycle of treatment, specifically: chidamide 30 mg/biw, cyclophosphamide 1100 mg/d1, doxorubicin 70 mg/d1, vincristine 2 mg/d1, dexamethasone 20 mg/d1-5, etoposide 100 mg/d1-5, 21 days as a cycle. (First paragraph in *TREATMENT* part, page 10, line 9)

After 4 cycles of treatment, the patient returned to the hospital for follow-up, and the patient's skin rash on the face, neck, trunk, and extremities disappeared (Figure 4A). (First paragraph in *OUTCOME AND FOLLOW-UP* part, page 10, line 17)

The last follow-up was performed half a month ago and the patient's condition was stable without recurrence (Figure 4B). (First paragraph in *OUTCOME AND FOLLOW-UP* part, page 11, line 8)

4. on page 6 line 23, there is a description of lesions on the patient's vulva, but the patient has been previously identified as a male.

Response: Thank you so much for your constructive advice. We fully agree with you. We wanted to describe the patient's perineum lesion, which was mistakenly described as the vulva, and we have revised the original text.

perineum. (First paragraph in *Physical examination upon admission* part, page 6, line 21)

5. the caption for Figure 1 should read as "scattered blood blisters".

Response: Thank you so much for your constructive advice. We fully agree with you. We have carefully modified the original text according to your suggestions. We have revised the caption of Figure 1 to "scattered blood blisters". In addition, we also supplement Figure 1 to make the picture look more vivid. The revised contents have been highlighted in the revised manuscript and attached as follows:

Scattered blood blisters were observed throughout the body, with the most severe blood blisters on the trunk, consistent with the distribution of skin transverse striae. (the caption of Fig 1, page 7, line 2)



6. on page 7 line 12 bone marrow could be described as "slight microscopic bone marrow hyperplasia".

Response: Thank you so much for your constructive advice. We fully agree with you. We have carefully modified the original text according to your suggestions. The revised contents have been highlighted in the revised manuscript and attached as follows:

The results of bone marrow biopsy showed that slight microscopic bone marrow hyperplasia. (First paragraph in *Laboratory examinations* part, page 7, line 12)

Fig 2 Bone marrow and skin biopsies. A: Bone marrow biopsy. Slight microscopic bone marrow hyperplasia.(the caption of Fig 2, page 8, line 8)

7. on page 12, line 19 "lymphoma is clinically heterogenous".

Response: Thank you so much for your constructive advice. We fully agree with you. We have carefully modified the original text according to your suggestions. The revised contents have been highlighted in the revised manuscript and attached as follows:

The results of bone marrow biopsy showed that slight microscopic bone marrow hyperplasia. (First paragraph in *Laboratory examinations* part, page 7, line 12)

Science editor:

1. The title is too long, and it should be no more than 18 words.

Response: Thank you so much for your constructive advice. We fully agree with you. We have carefully modified the original text according to your suggestions. We have revised

the title of the manuscript. The revised contents have been highlighted in the revised manuscript and attached as follows:

Chidamide combined with CHOPE regimen to treat primary cutaneous aggressive epidermotropic CD8+ cytotoxic T-cell lymphoma: a case report. (the title of the manuscript, page 1, line 5)

2. The authors did not provide the approved grant application form(s). Please upload the approved grant application form(s) or funding agency copy of any approval document(s).

Response: Thank you so much for your constructive advice. Because we currently only have the medical scientific research activity support agreement for the China Anti-Cancer Association Project, we have revised the original funding part, only retained the China Anti-Cancer Association Project, and uploaded the corresponding medical scientific research activity support agreement as an annex. Name of attachment as follows:

70529-Funding Approval Document

3. The authors did not provide original pictures. 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.

Response: Thank you so much for your constructive advice. We have used PowerPoint to arrange and sort out the original pictures, and all figures, arrows, text parts in the file can be re-edited. We have uploaded the corresponding PowerPoint file as an attachment with the following name:

70529-Figures

4. Please provide all authors ORCID numbers.

Response: Thank you so much for your constructive advice. We have carefully revised the original text according to your suggestions. The revised contents have been highlighted in the revised manuscript and attached as follows:

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Company editor-in-chief:

1. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file.

Response: Thank you so much for your constructive advice. We have used PowerPoint to arrange and sort out the original pictures, and all figures, arrows, text parts in the file can be re-edited. We have uploaded the corresponding PowerPoint file as an attachment with the following name:

70529-Figures

2. Language polishing requirements for revised manuscripts submitted by authors who are not native English speakers.

Response: Thank you so much for your constructive advice. After the revision of the manuscript, we have sent the revised manuscript to a native English professional editor for further language polishing to ensure that all grammatical, syntactical, formatting and other related errors be resolved and that the revised manuscript meets the publication requirements. We have uploaded this certificate as an attachment.

Once again, we sincerely appreciate the efforts and comments of both the editors and the reviewers. We hope that the revised manuscript can be suitable for publication in *World Journal of Clinical Cases* this time. And look forward to receiving comments again.

Yours Sincerely,

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