

**Dear editor and dear reviewers**

Re: Manuscript ID: 82502 and Title: Case report: Prostate-specific antigen reduction after CapeOx chemotherapy

Thank you for your letter and the reviewers' comments concerning our manuscript entitled "Case report: Prostate-specific antigen reduction after CapeOx chemotherapy" (82502). Those comments are valuable and very helpful. We have read through comments carefully and have made corrections. Based on the instructions provided in your letter, we uploaded the file of the revised manuscript which was repolished linguistically. The responses to the reviewer's comments are presented following.

We would love to thank you for allowing us to resubmit a revised copy of the manuscript and we highly appreciate your time and consideration.

Sincerely,

Chenye Tang

**Reviewer #1:**

**Q1.** The authors have presented a rare case of carcinoma prostate plus carcinoma rectum, where they believe that CapeOx reduced PSA level. However, there is a flaw in the report. The authors have not motioned what the PSA level was after the hormone treatment for carcinoma prostate before the identification of the carcinoma rectum. Without this value, how can the authors come to the conclusion that PSA level came down after CapeOx?

**Response:** We are grateful for the suggestion. In our original manuscript, we may not have well presented the PSA levels after the hormone treatment for carcinoma

prostate and before the identification of the carcinoma rectum. So, in this revised manuscript, we present detailed PSA trend during the entire treatment process (**page 4, line 19-26, and Figure 1**). The patient was administered androgen deprivation therapy (ADT) postoperatively from August 2020, and his PSA declined rapidly, eventually decreasing to zero in October 2020. However, after 6 months of ADT, the patient stopped treatment spontaneously in January 2021, and the PSA level began to rebound. Subsequently, the patient was diagnosed with rectal cancer in June 2021, and underwent laparoscopic radical rectal resection in July 2021. The PSA level was 0.141 and 0.169 ng/ml in June and July, respectively, and rose to 0.181 ng/ml in August 2021 before the CapeOx chemotherapy. Then, the PSA level declined again after CapeOx chemotherapy, and fell to zero in October 2021. All the PSA values were presented in **Figure 1B**. Therefore, we can come to the conclusion that PSA level came down after CapeOx chemotherapy.

**Q2.** There are a few grammatical corrections which are noted in the proof returned. They may be incorporate.

**Response:** We apologize for the language problems in the original manuscript. The manuscript was repolished linguistically.