date
May 2023

Dear Editor-in-Chief

Please find enclosed the revised manuscript entitled 'Inflammatory myofibroblastic tumor of the distal common bile duct: a case report and literature review with focus on pathological examination'.

We would like to thank the reviewers for their valuable comments, which definitely have improved our manuscript.

With this revised manuscript, we accommodated the remarks of the reviewers and editorial office. Please find our answers to their comments below. All changes in the revised manuscript are marked in red.

Reviewer #1: I find it incongruous to categorize it as a review article. In my understanding, it is more suitable to be formatted as a case report. Therefore, I suggest that the authors revise the format accordingly and resubmit it to the journal.

We resubmit this article as a case report.

Reviewer #2:.The case description itself lacks clinical focus, and it was unclear whether this was of biliary or pancreatic origin. Much more detail needs to be included regarding the clinical aspects of the case, and less detail on the pathological aspects.

We have added more clinical aspects and described the origin of the lesion.

Reviewer #3:

I would suggest in the abstract the hallmarks of the diagnoses.

We updated the abstract.

The article discusses a major number of markers etc. It would help the reader to have simple figure/flow diagram or whatever as a summary.

We added a summary with the essential criteria of the WHO.

Finally: The authors emphasize the importance of the absence or presence of markers. Please be a little more specific: what is speculation, and what has as yet been demonstrated to be true with respect to therapeutic implications?

This is mentioned in the section therapy.

Reviewer #4: Please add the clinical features (age, gender, biliopancreatic site, tumor size, etc.), diagnostic method and prognosis of inflammatory myofibroblastic tumor.

We have added the clinical features.

Reviewer #5: 1. Is this a pancreatic IMT or not? According to the authors' descriptions and gross photo (Fig. 1), this is a intraluminal polypoid mass of distal CBD (intrapancreatitic or juxtapancreatic?). So, the title of this manuscript could be revised.

We added more clinical information.

2. Pancreatic IMT is a rare tumor. Most of the manuscript was composed of general findings of the IMT. So, the reviewer proposed the revision of the title. For example, 'IMT of the distal CBD: a case report and literature review.'

We changed the title of the manuscript.

3. As you already mentioned "It was regarded as an inflammatory pseudotumor until it was officially considered a separate entity by the World Health Organization (WHO) in 2002.", the term 'inflammatory pseudotumor' was mentioned repeatedly (page 3 and 5). It makes confusion to the readers.

We updated this.

We hope that our responses are satisfying to the reviewers and the editorial office, and that our contribution will now be considered for publication.

With kind regards,

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