

Dear Editor,

Thanks for you to give me the permission to have a revised version of be published in *World Journal of Clinical Cases*. I am very glad to have the choice to discuss with you and the reviewers.

This is point-by-point responses:

Reviewer #1 (Anonymous)

1)I am not able to revise the manuscript. The matter is not within my area of expertise. I marked the acceptance by mistake and sent an email to the BPG help desk immediately afterwards, notifying about the error. Apologies for what happened.

**Response:** Thanks for your reviews.

Reviewer #2 (Anonymous)

1)Page 2, in the INTRODUCTION:

“Hidroacanthoma simplex (HAS), a rare tumor (...) was initially characterized in 1956”: It would be interesting to add a historical reference.

**Response:** A historical reference has been added (line 66, page 3).

2)Page 4, in the FURTHER DIAGNOSTIC WORK-UP:

“Histopathological examination”: Some explanations on the technique used would be useful: what fixative was used? Have the tissues been embedded in paraffin? what was the method of dehydration? It would be useful to specify the staining used (hemalun-eosin). “Immunohistochemical staining”: Some details on the immunohistochemical method would be useful: what is the origin (reference distributor) of the antibodies, what was the staining method used (use of a secondary antibody, use of peroxidases, nature of the chromogen (DAB, I suppose) How were the negative controls prepared?

**Response:**

1.“Histopathological examination”: Haematoxylin-eosin staining was used for histopathological examination, the fixative was 10% formalin and the tissues was embedded in paraffin. Dehydration was performed by passing the tissues through a series of graded alcohols. Histological methods have been added (line 111, page 4).

2.“Immunohistochemical staining”: Immunohistochemistry was performed according to the instructions of the Maxvision 2 HRP-Polymer anti-Mouse/Rabbit IHC Kit (Maixin Biotech, Fuzhou, China), the kit contains reagent A (goat anti-mouse/rabbit IgG HRP polymer, secondary antibody) and reagent B (DAB), and the antibodies were also provided by Fuzhou Maixin Biotech. On day one, after 10 minutes of immersion in xylene for deparaffinization, the slides were rehydrated in a series of graded alcohols. Endogenous peroxidase blocking agent (3% H<sub>2</sub>O<sub>2</sub>) was utilized to eliminate of the impact of peroxidase, and goat serum was used to inhibit nonspecific binding. Afterwards, slides were incubated with primary antibodies at 4°C overnight. The following day the slides were incubated with secondary antibody. Eventually, the slides were stained with DAB and counterstained with haematoxylin. Antibody dilutions were used instead of primary antibodies for negative control. Immunohistochemical staining

methods have been added (line 112-113, page 4).

3)Page 6, in the CONCLUSIONS:

“Precise diagnosis depends on histopathological examination, and immunohistochemical analysis”: This sentence (which I am happy to read) is one more reason to elaborate on the histological and immunohistological methods used.

**Response:** Histological and immunohistological methods have been added (line 111-113, page 4).

4)Page 9, figure 1a, b, c:

“A scale bar would be useful (more than magnification which varies with the size of the printed image).”

**Response:** The scale bars has been added in the pictures.



5)Page 10, figure 2 a, b, c:

“Scale bars would be helpful (see previous note for Figure 1). It would help if each image were detailed using arrows to show the important points described in the text.”

**Response:**

The scale bars have been added in the pictures and images were detailed using arrows and circle.

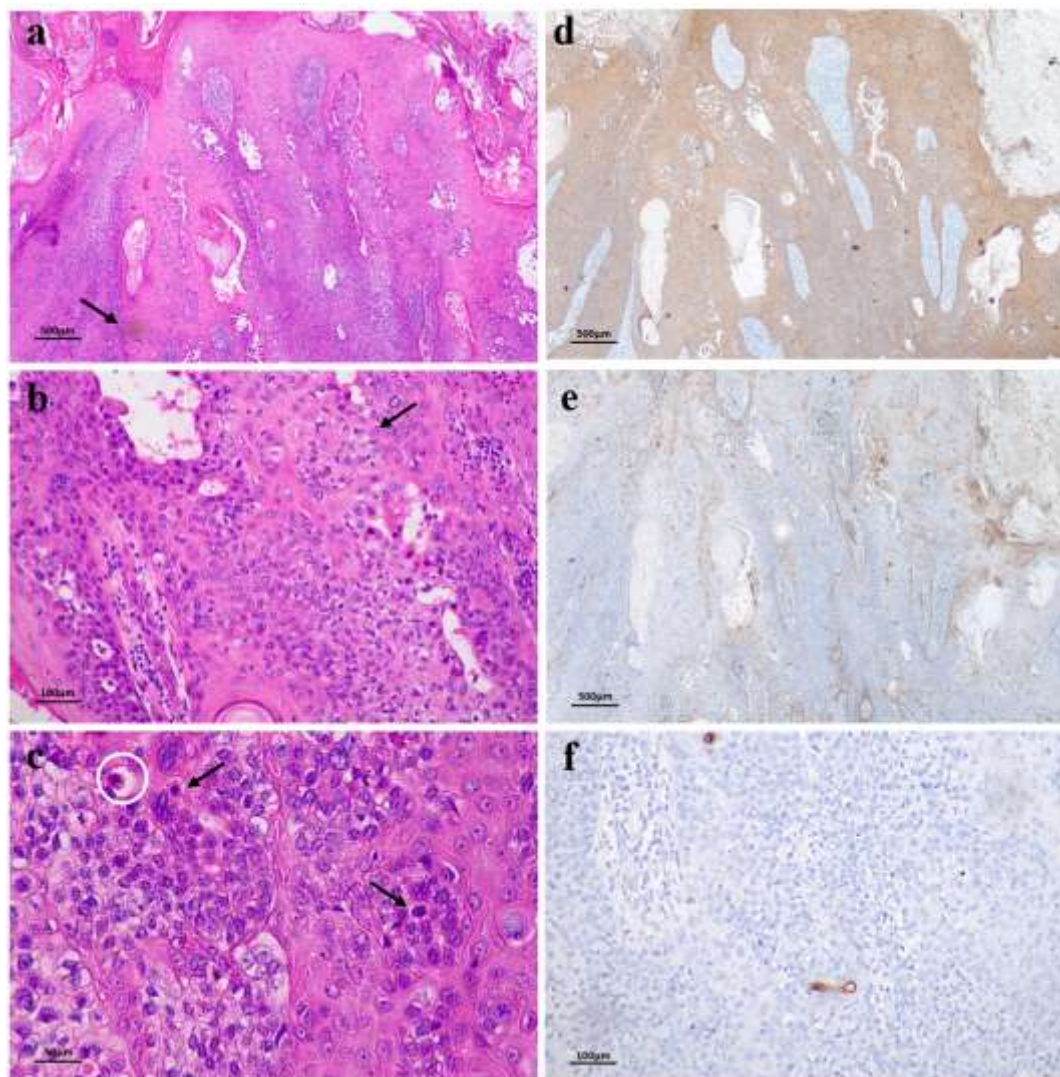


Figure 2

a: blunted epithelial feet (white arrow); b: neoplastic cells was less stained than the surrounding epithelium (black arrow); c: dyskeratotic cells (white circle) and mitotic figures (black arrows). Illustration has also been added in the figure legends (line 279-281, page 11).

6)Page 10, table 1.

“I appreciate this table summarizing 10 other cases with details. But I am afraid the table is not complete because it's too wide for the page.”

**Response:** The table format has been modified (page 12-13).

Best regards!

Sincerely yours.

Yu-Mei Li, MD, PhD