

Response letter

Reviewer #1 (Comments to the Author (Required):

Reviewer #1: The case report written by Zhuanglong Xiao et al. describes an interesting case of *Schistosoma japonicum* infection with a rare presentation. The case report is an important one, but there is a concern that needs to be addressed. Minor point. The patient showed heterogeneity in hepatic perfusion and ascites, suggesting that *Schistosoma japonicum* eggs are massively deposited in portal branches of the liver leading to portal hypertension. The authors should add such discussion.

Response:

Thanks for the constructive and positive comments. Corrections have been made in the revised version. As suggested by the reviewer, the related content is added in the revised discussion.

Reviewer #2: This is a unique case report of duodenal schistosomiasis. The detailed case presentation will satisfy readers. On the other hand, the discussion is superficial. Endoscopic diagnosis is a special point that should be emphasized in this case report. I recommend the authors quote the below paper to deepen the discussion. Mohamed AE, et al. Gastrointestinal parasites presentations and histological diagnosis from endoscopic biopsies and surgical specimens. Saudi Med J. 2000; 21: 629-34.

Response:

Thanks for the constructive and positive comments. Corrections have been made in the revised version. The diagnosis of gastrointestinal Schistosomiasis is established by histological evidences in clinical practice. Thus, endoscopic examination found the lesion of gastrointestinal parasites, and pathological evidences from endoscopic biopsies defined the diagnosis of parasites infection. We deepen the discussion according to the suggestion of reviewer. The related article is cited in our revised manuscript.

Reviewer #3: In the interesting case report the case of fulminant infestation with *Schistosoma japonicum* is described. Diagnostic and therapy are addressed. Comments 1. The authors should illustrate the morphological finding of *Schistosoma japonicum*. In the ELISA the species *Schistosoma*, but not *japonicum* is identified.

Response:

Thanks for the constructive and positive comments. ELISA tests for anti-*Schistosoma* antibody demonstrated the infection of *S. japonicum* because *S. japonicum* is the only human blood fluke that occurs in China. Corrections have been made in the revised version.