

Dear Editor,

We are pleased to answer the questions of the reviewers and the manuscript titled "A rare case of ileal bronchogenic cyst" (ID:41608) has also been extensively revised according to the comments.

Question #1: How is it possible that the patient noted abdominal mass for one week and physical examination is normal?

Answer: The patient was once accepted CT examination because of the lumbago. And this was latterly diagnosed as degenerative changes of lumbar spine. The mass was occasionally found in the CT scan.

Question #2: Was laparoscopic surgery i.e. diagnostic laparoscopy performed? If not why?

Answer: Diagnostic laparoscopy was performed before the open surgery. We have revised the details of the operation as "During the diagnostic laparoscopy, we found a spheroid mass with complete capsule located at the antimesenteric border of the distal ileum 20cm from the ileocecal valve, which measured 6.0×6.0×5.0 cm. Considering that the malignancy of the tumor can't be ruled out, and there is a risk of rupture under the laparoscopic surgery. Then the patient was shifted to open surgery".

Question #3: How much length of ileum beyond the cyst was excised?

Answer: We have added the length of the excised ileum in the manuscript as below: "The resection margin was 3cm away from the tumor edge."

Question #4: Please mention the operative time, blood loss and duration of hospital stay.

Answer: We have added the details in the manuscript as below: "The surgery went 135 minutes. And the volume of blood loss was 50 ml...The patient discharged 8 days after the operation."

Question #5: Please provide the intra-operative image if possible.

Answer: It is a pity that we didn't have the intra-operative image.

Question #6: Please provide the latest follow up of the patient.

Answer: We performed the telephone follow-up one month ago. And the

patient felt no uncomfortable, so he was not willing to went back to the hospital or receive CT scan.

Question #7: Please include duplication cyst in the differential diagnosis in Discussion.

Answer: We have added the duplication cyst in the differential diagnosis. Thank you very much.

Question #8: Why the patient receive the abdomen CT examination? as mentioned in the manuscript, the patient had no abdominal discomfort?

Answer: The patient was once accepted CT examination because of the lumbago without abdominal discomfort. And this was diagnosed as degenerative changes of lumbar spine. In the CT scan, we found the mass.

Question #9: In the INTRODUCTION "Bronchogenic cysts have been reported in the mediastinum (1), lung (2), heart (3)..." and in the DISCUSSION "Bronchogenic cysts have frequently been reported in the mediastinum (1), lung (2), heart (3)..." There is the same allegation and no need to repeat the the same references.

Answer: We have deleted the same references. In the DISCUSSION, it is now revised as "Bronchogenic cysts located in mediastinum, lung and heart have been reported a lot..."

Best regards,

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