

Re: Manuscript reference No. [50448]

Dear Dr Editor

Thank you for arranging a timely review for our manuscript. Your comments and those of the reviewers were highly insightful and enabled us to greatly improve the quality of our manuscript. In the following pages are our point-by-point responses to each of the comments of the reviewers.

Revisions in the text are shown using red for additions so that they may be easily identified. In accordance with your suggestion, we changes the article according to suggestions. We hope that the revisions in the manuscript and our accompanying responses will be sufficient to make our manuscript suitable for publication in World Journal of Clinical Cases.

We shall look forward to hearing from you at your earliest convenience.

Yours sincerely,

Huang Rong,

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Responses to the comments of Reviewer #1 Reviewer's code: 00724702

The authors report that "apatinib was recommended for the treatment of advanced gastric adenocarcinoma adenocarcinoma of the gastroesophageal junction by the Food and Drug Administration of the People's Republic of China(CFDA)" but there is no evidence for its use in "pseudomyxoma peritonei". This may start a dangerous precedence of trying random drugs for verious pathologies. This case report cannot be approved.

Response:

Thank you for your critical comments and we totally agree with your suggestions which might be of great help to improve the quality of our manuscript. We greatly accept the reviewer's suggestions that apatinib was recommended for the treatment of advanced gastric adenocarcinoma adenocarcinoma of the gastroesophageal junction by the Food and Drug Administration of the People's Republic of China(CFDA). Although there is no authorized guideline for utilization of apatinib for pseudomyxoma peritonei in China, lots of doctors applied apatinib to many cancers which are not part of advanced gastric adenocarcinoma adenocarcinoma of the gastroesophageal junctionlung in China, for example, adenocarcinomam, breast cancer, cervical cancer, et al(Journal of Modern Oncology, 2019, (20):3620-3624. Anhui Medical and Pharmaceutical Journal, 2019, 23(08):1670-1673. Chinese Journal of Modern Applied Pharmacy, 2019, 36(12):1553-1555.).

In addition, the patient had been undergone repeated treatment of surgical treatment and hyperthermic intraperitoneal chemotherapy, however, the tumor was repeated recurrence and the patient feel recurrent abdominal distension. Therefore, we suggested that apatinib treatment for PMP because apatinib can inhibits all VEGF-stimulated endothelial cell migration and proliferation, decreases tumor microvascular density and promotes apoptosis.

Responses to the comments of Reviewer #2 Reviewer's code: 00009760

Good paper. Please provide recent follow up.

Response:

We thank the your valuable suggestion. After reviewing our hospital on December 18, 2017, the patient did not come back to our hospital for review. Now, by contacting the family members, the patient was relapsed in June 2018 and received surgery in the external hospital. After continued treatment with apatinib, recurrence occurred again in January 2019, the patient was died for intestinal obstruction and multiple organ failure at 1 months after surgery.