

Dear professor,

Thank you for your comments. For your questions, I have seriously considered and revised the article.

1. The questions raised are valuable and deserve our attention. For the complex state such as rupture and hemorrhage, the diagnosis needs to be combined with enhanced CT or MRI. But for the cases where enhancement cannot be applied, such as pregnant women with unclear risk of using contrast media, emergency diagnosis in urgent need of surgical treatment, etc. Typical renal angiomyolipoma and renal cell carcinoma can be distinguished by ultrasound or unenhanced CT to complete the initial diagnosis and guide the clinical treatment. The images of the patient in our case are typical and with bilateral angiomyolipoma lesions, so it has not been further enhanced. Our article is intended to improve the ultrasound diagnostic accuracy of the condition through summarizing the ultrasound characteristics in such a ruptured state, so as to assist the clinical treatment better. I made some modifications based on your comments, which marked in red.

2. Cetin C et al. mentioned that the gestational week is from 9 to 39 weeks of the 26 cases (reference 8). The mean gestational age of the patients in the literature at the time of diagnosis was 27.7 weeks.

3. Due to incomplete understanding of the case at that time when the case occurred, only pathological results were obtained, and there was certain regret that the tumor couldn't be tested for estrogen and progesterone receptors.

Yours,

Dongxuan Wang

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