

Dear Editors and Reviewers,

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "***Rapid response to radiotherapy in unresectable adenoid cystic carcinoma of trachea: a case report***" (Manuscript ID: **62930**). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our paper. We have studied comments carefully and have made correction which we hope meet with approval. Revised portion are marked in red in the paper by using the track changes mode in MS Word. The main corrections in the paper and the responds to the reviewers' comments are as flowing:

#### **Round-1**

Reviewer #1:

*Thank you very much for your comments and suggestions.*

Reviewer #2:

1. Comments to the author: ***long term toxicity is not mentioned. It would be of the particular interest as a dose constraint of cervical oesophagus was largely exceeded. Any dysphagia? - potential oesophageal late complications after the tose prescribed must be mentioned in the text (similar to trachea dose limit), - acute and late toxicity must be graded, though retrospectively, use RTOG or CTC AE scale.***

Responses to comments: *Thanks to the reviewer's constructive suggestions, we have added this suggestion in abstract and conclusion.*

2. Comments to the author: ***radiotherapy prescription must be described clearly in methods and in fig. 3, with explicit total dose assignement in terms of PTVs which may be marked in cGy or in Gy, making 76 Gy in total (current description states 60 + 10 + 16 Gy)***

Responses to comments: *Thanks to the reviewer's kind reminder, the PGTV actually received prescribed dosage of 76 Gy per 2 Gy in total. we have added this correction in abstract and conclusion.*

***We are very grateful to the reviewer for pointing out the grammatical errors and for his patience in correcting the grammatical errors for this manuscript.***

We appreciate for Editors/Reviewers' warm work earnestly, and hope that the correction will meet with approval.

Once again, thank you very much for your comments and suggestions.

#### **Round-2**

Reviewer

Thank you for corrections. I believe your paper provides comprehensive and consistent information. Please correct: in Treatment: The weights of the three posterior fields were reduced (lessen than the others), in Outcomes: After 5 years (of) from treatment, the patient (survivals) survives...

Responses to comments: Corrected.