

Dear Editor Wang and Reviewers:

Thank you very much for the helpful comments of reviewers for our manuscript, WJG-10495.

We have revised our manuscript seriously according to the reviewer's comments. Below is our response to the reviewer's comments point-by-point, and our changes made in the manuscript are highlighted in blue.

Reviewer 1:

The authors report a patient of upper GI bleeding because of HCC invasive stomach, and share the information of this rare case treatment with readers.

Main comment

1. As a case report, the manuscript is too long

Respond: We had shorten the MS according to reviewers' comment.

2. the language should be improved

Respond: the MS has been revised by Edanz Editing Company, the certification will upload synchronously.

3. Fig. 4 is from immunohistochemical results? How to judge the CK 8/18+, Hepar-1+, CK 20+, AFP-, CEA-, CD 34 vessel+, and CD 117- from Fig.4 ?

Respond: Immunohistochemical Pics has been provided in MS. (Fig. 5)

Minor comments

1. The abbr. of GI in title is ok?

Respond: it has been revised in title. (Page 1, Line 1)

2. The use of abbreviation in text is not regular

Respond: it has been revised. Full name was listed with abbreviation when it appeared firstly.

3. Fig. 1 can use arrow showing the location of tumors

Respond: it has been revised.

4. Ref.8, Ann Surg Oncol is journal? Volume and page?

Respond: Volume and page Ref. 8 has added. (Page 13, Line 20)

Reviewer 2:

The submitted manuscript concerns an usual and interesting case of upper gastrointestinal bleeding. The presented data are sufficient; however some changes and corrections have to be done. Comments

1. The Abstract has to be shortened.

Respond: Abstract has been shortened.

2. In the Abstract, line 12, the sentence "gastric lumen ....." has to be corrected as follows: "gastric wall: a larger mass in close contact with a tumor in the left....."

Respond: gastric lumen has changed to gastric wall. (Page 3, Line 11)

3. "Gastric lumen", wherever is written in the text, has to be replaced by "invasion of the gastric wall with protrusion or exposure of the tumor or tumor mass into the lumen".

Respond: We maintain Gastric lumen is proper.

4. In the Introduction, at the end of the 1st paragraph, the word “erosive” has to be added before “gastritis”.

Respond: erosive has been added before “gastritis”. (Page 5, Line 13)

5. in the section Case Report:

a) Figures and Legends should not be included in the main text (see guidelines)

Respond: Figures and Legends have been listed separately.

b) Histological photos are of poor quality.

Respond: we’re sorry for that, because it is limited by equipment. But they were meeting the quality standard of WJG.

c) Figures A and C have to be replaced by a single figure showing transmural invasion of the stomach by HCC.

Respond: Thanks to this good suggestion, we have seek over and over again, there was no slice meet the demand, we will pay attention to the process of making slice.

d) The gross examination of the surgical specimen as well as histology including immunohistochemical findings should be displayed in detail after imaging, endoscopy and surgical procedure which in turn have to be presented in a consecutive manner.

Respond: it has been revised in MS. (Page 7, Line 18)

e) First page, line 12, “pathology” should be replaced by “histological examination”.

Respond: it has been revised in MS. (Page 6, Line 12)

f) First page, line 15, do the authors mean “ 3 years later?”

Respond: it has been revised in MS. (Page 6, Line 15)

g) First page, line 20, “since the procedures” has to be deleted.

Respond: it has been deleted.

6. In the Discussion:

a) Page 11, line 3, more information as well as references are missing

Respond: we have added a reference to show the similar cases have been reported.

b) Page 12, line 4, .... Invasion of the gastric wall as a consequence of inflammation..... has to be more clearly formulated.

Respond: it has been revised in MS. (Page 9, Line 7)

c) ACT and ATT have to be defined.

Respond: they have been defined in MS. (Page 10, Line 12)

Reviewer 3:

The case report is benifial to guide the clinical doctors to diagnose and treat the upper gastrointestinal bleeding because of rare causes such as hepatocellular carcinoma invasion. 2) I suggest that the article can be published in the form of case report .

Respond: Thanks to your comments.

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