

Point-by-point responses

Thank you for your kindness and valuable suggestions.

According to your comments, we revised our initial draft.

We prepare 2 versions of manuscripts. One is **Marked** revised manuscript (Additional mention in **Blue**, and deleted parts in **Red**), and another is **Unmarked Clear** revised manuscript.

We also made a **Point-by-point response**, separately.

This revised manuscript was checked by English consultant..

Language consultant: edanz editing

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Sincerely yours,

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To Reviewer 1

Thank you for your valuable suggestions.

According to your suggestions, we revised our initial manuscript.

1. The images for histology and operation

Thank you for your suggestions.

According to your suggestion, we added the histopathological finding (Fig. 5A in the revised manuscript) and the intraoperative findings (Figs. 4A and 4B, in the revised manuscript).

2. The strategy for the therapy

Thank you for your valuable suggestion.

Because liver metastasis should be considered as the systemic disease, pheochromocytoma without distant metastasis may be a good candidate for more aggressive adjuvant chemotherapy.

According to your suggestion, we added the mention as described below.

‘A previous report documented that the expression of telomerase activity clearly suggests malignant behavior of the component cells^[3]. We speculate that analysis of telomerase activity in the biopsy or resected specimens may predict the disease course, and may be useful for deciding therapeutic strategies including surgical procedures and postoperative therapy. We understand that liver metastasis should be considered as the systemic disease. We speculated that more aggressive adjuvant chemotherapy will be required in the cases with

increased telomerase activity, even in the pheochromocytoma without distant metastasis.' (Page 8 line 3-15, in the Marked revised manuscript).

To Reviewer 2

1. CT images for multiple metastasis and PTPT effects

Thank you for your valuable suggestion.

At first, according to your suggestion, we added CT images for multiple metastasis (Fig. 2, in the revised manuscript).

Next, according to your suggestion, we added angio-CT images and GSA scintigraphy findings before and after PTPE (Fig. 3A and 3B, in the revised manuscript).