

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This is a well written letter to the editor in response to the review of solid pseudopapillary neoplasm (SPN) of the pancreas by Omiyale (2021). The authors reiterated that chemoradiotherapy regimens are not well standardized and curative R0 surgical resection is the best treatment option. The authors highlighted the fact that a small subset of these tumours may behave in an aggressive fashion, a point also raised by Omiyale (2021). The authors cited the review of 59 cases by Hao et al. (2018) that reported a 5-year disease-free survival rate of 26.8% and a 5-year and 10-year overall survival rates of 71.1% and 65.5% respectively. Based on this data, the authors concluded that "about one third of patients affected by SPN will die of this disease". While I agree with the interesting findings of Hao et al. (2018), the conclusion by the authors of this letter does not consider the fact that the study population in the Hao et al. (2018) review represents a specific subset of SPNs. The inclusion criteria for the Hao et al. (2018) study were cases of SPNs with an aggressive behavior, recurrence, and metastasis. For this reason, it will be inaccurate to generalize the findings to all patients with SPN and conclude that "about one third of patients affected by SPN will die of this disease". Overall, this is a relevant contribution to the discourse on solid pseudopapillary neoplasm of the pancreas.

R.: Thank You for the comment. We better clarified that the patients in the study by Hao were affected by aggressive SPN and rephrased.

Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade A (Priority publishing)

Conclusion: Major revision

Specific Comments to Authors: The letter emphasized the current highlights of the SPN. However, it provides little new to the original review.

R.: The review written by Omiyale is very comprehensive and useful in providing information on this very rare disease. However, some additional information have been added in our letter to complete the landscape. Specific revisions have been made according to the requests of the other reviewers to make it more and more complete.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: It would be interesting to make known, in your letter to the editor, that the histological study is essential to confirm the diagnosis in conjunction with the immunohistochemistry and that the proposed classification according to number of lesions (doi: 10.1016 / j.ijscr.2021.106131) and Tumor location is useful for surgical planning. Remember that the presentation in women has a bimodal curve, with a peak at 28 and 64 years, versus in men that only shows a peak at 64 years of age

Reply: Thank You for your comments. The important role of histology combined with immunohistochemistry has been highlighted. Also, the role of the proposed classification in

surgical planning has been underlined. The bimodal curve of presentation in women has been reported.

(1) Science editor:

The letter written by Simone S, et al. was well-written and informative. Revision according to the reviewers' comments will improve the scientific quality of this work.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Hepatology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

R.: Thank You for your comment. Revision according reviewers' comments has been made to improve the scientific quality of the manuscript.