RESPONSES TO REVIEWER COMMENTS

Reviewer #1: Major comments:

1. I think the title should be more specific. I suggest using the MeSH term EUS-FNA (full form).

Response:

We agree with the reviewer's advice and have therefore revised the title for clarity and to use the recommended term (page 1, lines 3-4). ~~So, we changed it more clearly.~~

2. Did the authors attempt to preserve the spleen when performing pancreatectomy? Spleen-preserving pancreatectomy is appropriate in patients with solid papillary neoplasms of the pancreas. I believe that since the patient was young, this should have been attempted in spite of the complexity of the technique.

Response:

We thank the reviewer for bringing up this point. ~~Of course, we~~Indeed, we had planned the pancreatectomy with preservation of~~ing~~ the spleen, ~~, though~~ even though ~~we thought that~~ it ~~was~~ would be difficult to separate the splenic vein f~~o~~rom the pancreas. However, ~~we were~~ because of bleeding from the splenic vein during the operation, ~~so, we should have~~ it was necessary to perform~~ed~~ splenectomy ~~for~~ to control bleeding ~~control from splenic vein~~.

We have added some commentary on the need for splenectomy in the~~these information in the~~ 'Case presentation' section:

- The patient underwent laparoscopic pancreatectomy. Because of bleeding from the splenic vein during the operation, it was necessary to perform splenectomy to control bleeding (page 8, lines 3-5).

Minor comments:

1. The English in the manuscript needs thorough polishing.
2. There are many errors involving an e-mail address, spelling, an abbreviation, English medical expressions.

Response:

~~We were rechecked the revised manuscript by the native speakers once again, after we made the required changes~~. After revising our manuscript to address the reviewers'

Comment [A1]: This text was added for politeness.

Comment [A2]: Please note that "we should have performed splenectomy" means "we should have performed splenectomy, but we did not perform splenectomy."

comments, we have had it rechecked by a native speaker of English. As a consequence, many minor grammatical and stylistic edits have been made throughout the text. We hope that this revised manuscript meets your expectations.

Reviewer #2: This case report is very interesting and suitable for this journal.
The discussion should be given as a separate section. Also, the authors' conclusion that EUS-FNA is useful in the definitive diagnosis for such neoplasms is apt. However, they should add information of literature on advantages and complications/risks of this procedure not in a table. The table is too detailed and confusing. Please add this to discussion text.

Response:
We thank the reviewer for their remarks on our case report.

With respect to the reviewer's request for a discussion section, please note that the journal's instructions state that discussion of the literature should be included in the 'Case presentation' section of the manuscript. We have therefore included our discussions of the relevant literature at that location (Page 9, Line 10 to Page 12, Line 6).

We have deleted the table and added the ~~text~~ literature in the text. We have added the following brief summary of literature on this subject in the ~~We added contents in the~~ 'Case presentation' section of the manuscript:

EUS-FNA has been reported to increase the diagnostic yield to 82.4%, which is a much higher value than that reported for CT or EUS [11]. Hemorrhage and duodenal perforation are the most common complications noted; however, they occur in less than 1% of cases [14]. The outcome observed in our case also supports the observations that EUS-FNA is a useful and safe method (page 12, lines 11-16).

Comment [A3]: Your initial response did not address the reviewer's suggestion of including the discussion as a separate section. I have therefore added this explanation since the target journal you have requested formatting for does not need a separate section.

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Minor comment:
Reviewer #3:
1) The literature review should have been more robust before writing the paper. Currently, the number of solid papillary pancreatic neoplasm cases must be actually

more than what you have reported. In addition, please describe very clearly the literature search methods you used. For example, which search engines did you use etc.?

Response:

We searched ~~within the~~ the PubMed database. Per your comment, we have added all details to the~~We added these contents in the~~ 'Case presentation' section (Page 10, Lines 1-10).~~.~~

2) The detailed classification of the tumor has already been described on page 4 and does not need to be repeated later in the case presentation.

Response:

We ~~feel that too~~ agree with you. ~~and removed it~~We have removed the description appearing on page 9, lines 3-6.

3) The exact time when the follow-up examination was conducted is not clear. Did you mean 3 months from the time of first presentation or 3 months after the patient's discharge from the hospital?

Response:

~~Sorry about~~ We apologize for the confusion~~.~~ and thank you for pointing out this problem. ~~We meant~~ The patient was followed up 3 months after the ~~procedure~~ operation was performed. We have ~~corrected~~ revised the sentence ~~this~~ in the paper accordingly (page 12, lines 4-6).

Comment [A4]: This response may not satisfactorily address the reviewer's concerns.
Simply mentioning the database is not sufficient. Please also consider specifying which keywords you used to search PubMed and for which time period.

Since the reviewer has commented that there have been more published cases than you report, please double-check and add how many cases you found and what they were about. If you excluded mentioning some of them, clarify why you did not include them in your count.