**Author’s response to reviews**

**Title:** Life-threatening gastrointestinal bleeding during targeted therapy for advanced renal cell carcinoma: a case report

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Dear Dr. Hayley Henderson

We are enclosing the manuscript entitled “Life-threatening gastrointestinal bleeding during targeted therapy.” for consideration as a publication in “BMC Nephrology”. This report describes a case of endoscopic hemostasis with argon plasma coagulation (APC) effectively resolved life-threatening gastrointestinal bleeding that had occurred during targeted therapy.

With the advent of targeted agents for the treatment of renal cell carcinoma (RCC), overall survival has improved, and patients are being treated continuously for increasingly long periods of time. This has raised new challenges related to management of the associated adverse events. Temsirolimus has important clinical activity in both untreated and previously treated patients with advanced RCC. Severe adverse events associated with temsirolimus are uncommon; however, the most frequent grade 3 or 4 adverse events are anemia, asthenia, and hyperglycemia.2 Targeted therapy–related stomatitis and mucositis have occurred during targeted therapy, but there is no consensus on which strategy is the most effective. mTOR inhibitors may be related to the development of stomatitis, mucositis, and vascular ectasia through mTOR pathways. This case demonstrates the importance of considering a diagnosis of targeted therapy-related gastrointestinal bleeding and endoscopic hemostasis with APC in patients with an advanced renal cell carcinoma.

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We appreciate your review of this work.

Sincerely yours,