Author's response to reviews

Title: Early stage signet ring cell carcinoma of the colon examined by magnifying endoscopy with narrow-band imaging: a case report

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Author's response to reviews: see over
Dear editor and reviewers,

Thank you for reviewing our manuscript and providing your comments and suggestions. We have provided our responses to your comments as follows.

For reviewer 1

Major 1
Thank you for your comment. Our patient had no familial history of any cancer (P4, L79), so we do not believe that it could be a case of HNPCC.

Major 2
We could not perform a gene test because the patient did not provide his consent for it.

Major 3
As you pointed out, in this case, the findings of signet ring cell carcinoma of colon are indeed similar to those of gastric signet ring cell carcinoma. However, since there has been no report on signet ring cell carcinoma of the colon observed using magnifying endoscopy with NBI, we wanted to emphasize these findings.

Major 4
If we took a biopsy prior to endoscopic resection and confirmed the presence of signet ring cell carcinoma, the patient should have been subjected via surgery. But we didn’t doubt the presence of signet ring cell carcinoma. If we took biopsies before endoscopic resection, the lesion would be difficult to be resected endoscopically due to the fibrosis following the biopsies. Therefore, we did not take a biopsy. This explanation has been included in the revised manuscript. (P7, L159)

For reviewer 2

Major 1
The English language of the text has been reviewed by a native speaker specializing in editing scientific manuscripts by Enago’s professional editing service.

Major 2
Thank you for this suggestion. We have added the information relation to mucin phenotype using immunostaining. (P5, L103)

Major 3
We have accordingly corrected the text as follows. if we took a biopsy prior to endoscopic resection and confirmed the presence of signet ring cell carcinoma, the patient should have been subjected via surgery. (P7, L159)

Minor 1
We have corrected the sentence for clarity as follows. The tumor cells infiltrated 250 µm into the submucosal layer and involved lymphatic vessels, but there was no vascular invasion. (P5, L106)

Minor 2
Please refer to the response to the fourth comment of reviewer 1.

Minor 3
Thank you for the suggestion. We have described the microsurface pattern in the revised manuscript. (P4, L89)

Minor 4
Thank you for the suggestion. We have accordingly described vascular invasion and lymphatic invasion separately. (P5, L106)

Sincerely,

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