Author’s response to reviews

**Title:** Gastric schwannoma with giant ulcer and lymphadenopathy mimicking gastric cancer: a case report

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**Version:** 2 **Date:** 03 Feb 2020

**Author’s response to reviews:**

Response to the comments for the manuscript

Manuscript Number: BMGE-D-19-00877R1

Title: 18F-FDG PET/CT imaging of gastric schwannoma with giant ulcer and lymphadenopathy mimicking gastric cancer: a case report

Dear Dr. Morais,

We thank you very much for giving us an opportunity to revise our manuscript. Also we appreciate editors and reviewers very much for their positive and constructive comments and suggestions on our manuscript, entitled “18F-FDG PET/CT imaging of gastric schwannoma with giant ulcer and lymphadenopathy mimicking gastric cancer: a case report”( BMGE-D-19-00877R1)

We have carefully studied reviewer’ comments and made extensively revised in the revised paper. We also responded point by point to the editors’ and reviewer’ comments as listed below, along with a clear indication of the location of the revision.

We would like to express our great appreciation to you and reviewers for comments on our paper. We feel that your comments have greatly helped us to strengthen our manuscript and we hope that the revised manuscript will be acceptable for publication in the “BMC Gastroenterology”. Looking forward to hearing from you again.
Best wishes.

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Encl.

Comments from the editors and the reviewers

Editor Comments:

Please review the manuscript and edit throughout, see below for suggestions:

Response: We sincerely thank the editor for these excellent suggestions. We have carefully corrected the grammatical mistakes and corrected each of the minor errors in the revised manuscript according to the advice of the editor, along with a clear indication of the location of the revision.

Page 2, line 6 should be “intramuscular plexus of the stomach”

Page 2, line 3 in the revised manuscript.

Page 2, line 8/9 should be “with a surface ulcer is very rare”

Page 2, line 4 in the revised manuscript.

Page 2, line 11 should be “a rare case of an ulcer-bearing”

Page 2, line 5 in the revised manuscript.

Page 2, line 22 should be “(at the angular notch)"

Page 2, line 9 in the revised manuscript.

Page 2, line 22 please review “,” Its raised”, should the comma be a period?
Page 2, line 9 in the revised manuscript.

Page 2, line 24 should be “bled easily”

Page 2, line 10 in the revised manuscript.

Page 2, line 26/27 insert a space between “tomography” and “(CT)”

Page 2, line 11 in the revised manuscript.

Page 2, line 26/27 should be “revealed a mild”

Page 2, line 11 in the revised manuscript.

Page 2, line 37 insert a space between “tomography” and “((18F-FDG PET)/CT”; also, there is a missing bracket after “CT”

Page 2, line 15 in the revised manuscript.

Page 2, line 48/49 should be “metastasis in the 13”. Do you mean metastasis (singular) or metastases (plural)?

We mean metastasis (singular). Page 2, line 20 in the revised manuscript.

Page 2, line 51/52 should be “with a giant surface ulcer”

Page 2, line 21 in the revised manuscript.

Page 3, line 3/4 should be “Schwannoma is a benign tumor originating from the nerve sheath”

Page 3, line 2 in the revised manuscript.

Page 3, line 6 you define “Gastric schwannomas” as “GS” and then on page 6, line xx you define “gastric schwannoma” also as “GS”. Please review the use of abbreviations.

We have reviewed the use of abbreviations and define “gastric schwannoma” as “GS” and corrected the expression in the revised manuscript (page 2, line 4,5; page 3, line 3,5-6,11)
Page 3, line 27 insert a space between “revealed a sizeble” and “(4.5 cm x 6.0 cm)”

Page 3, line 19 in the revised manuscript.

Page 3, line 29/39 should be “within the body of the stomach, at the angular notch.”

Page 3, line 20 in the revised manuscript.

Page 3, line 31/32 should be “fragile and bled easily. Thus, GC was suspected.”

Page 3, line 21 in the revised manuscript.

Page 3, line 36/37 please confirm that there is a space following the period

Page 3, line 23 in the revised manuscript.

Page 3, line 39/40 should be “showed a mild enhancement”

Page 3, line 24 in the revised manuscript.

Page 3, line 41/42 should be “annular zone of mucosal discontinuity was also identified”

Page 4, line 1-2 in the revised manuscript.

Page 3, line 44/45 insert a space between “in the vicinity” and “(Fig. 1D)”

Page 4, line 3 in the revised manuscript.

Page 3, line 51/52 should be “urine and stool tests”

Page 4, line 5 in the revised manuscript.

Page 3, line 54 should be “and kidney function. Serum assays for”

Page 4, line 6 in the revised manuscript.
Page 3, line 56/57 insert a space between “tomography” and “((18F-FDG PET)/CT”; also, there is a missing bracket after “CT”

Page 4, line 7 in the revised manuscript.

Page 4, line 1 should be “in the gastric cavity, with a heterogeneous increase”

Page 4, line 8 in the revised manuscript.

Page 4, line 2/3 the “no” should not be capitalized

Page 4, line 10 in the revised manuscript.

Page 4, line 4/5 insert a space between “lymph nodes” and “(Fig. 1D)”

Page 4, line 10 in the revised manuscript.

Page 4, line 4/5 should be “Malignancy”

Page 4, line 11 in the revised manuscript.

Page 4, line 17 insert a space between “Hematoxylin and eosin” and “(H&E)”

Page 4, line 16 in the revised manuscript.

Page 4, line 19/20 should be “slides” if multiple slides were used, and “revealed” instead of “reveals”

Page 4, line 16 in the revised manuscript.

Page 4, line 24/25 should “S-100 and SOX10 were positive”, and insert a space between “positive” and “(Fig. 2B)”

Page 4, line 19 in the revised manuscript.

Page 4, line 26/27 should be “CK20, CK, villin, CDX-2, CD117, CD34, SMA, desmin, and c-erbb-2 were negative”
Page 4, line 19- 20 in the revised manuscript.

Page 4, line 29 “metastases were” (plural) or “metastasis was” (singular)? Should be “seen in any of the sections”

Page 4, line 20 - 21 in the revised manuscript.

Page 4, line 31/32 should be “well one year following surgery”

Page 4, line 21-22 in the revised manuscript.

Page 4, line 34 “metastases” (plural) or “metastasis” (singular)?

We also have carefully corrected the grammatical mistakes in the revised manuscript. (Page 4, line 22)

Page 5, Fig. 1 should be “tomography shows a high”; insert a space between “upper abdomen” and “(white arrow)”; should be “view of the irregularly”; remove brackets from “with (slight enhancement)”; should be “uptake was observed”; insert a space between “gastric mass” and “(SUVmax 14.6, white arrow)”; should be “abutting the lesser curvature”

Page 5, Fig. 1 line 2-6 in the revised manuscript.

Page 5, Fig. 2 should be “palisading”, insert a space before “(H&E, 100x)” and insert a space between “immunohistochemically staining” and “(100 x)"

Page 5, Fig. 2 line 8-10 in the revised manuscript.

Page 6, line 5-8 should be “originates from the Schwann cell”

Page 6, line 2 in the revised manuscript.

Page 6, line 10 do you mean “evolves” instead of “involves”? We mean “involves”. Page 6, line 3 in the revised manuscript.

Page 6, line 12/13 should be “the most commonly referred symptom is abdominal discomfort, while upper gastrointestinal bleeding”
Page 6, line 4,5 in the revised manuscript.

Page 6, line 17/18 insert a space between “prognosis” and “[1]”

Page 6, line 7 in the revised manuscript.

Page 6, line 19/20 should be “done well one year following surgery”

Page 6, line 8 in the revised manuscript.

Page 6, line 22/23 review abbreviation (GS)

We have reviewed the use of abbreviations and define “gastric schwannoma” as “GS” and corrected the expression in the revised manuscript (Page 6, line 9 ,24 ).

Page 6, line 24-27 should be “Gastrointestinal stromal tumor (GISTs) consist of spindled cells with nuclear palisading and may mimic schwannomas in particular.”

Page 6, line 18 in the revised manuscript.

Page 6, line 29/30 should be “different” not “difference”, and insert a space before “[3]”

Page 6, line 20 in the revised manuscript.

Page 6, line 34/35 should be “, which were strongly positive”

Page 6, line 22 in the revised manuscript.

Page 6, line 37 remove “which” before “thus”

Page 6, line 23 in the revised manuscript.

Page 6, line 41/42 should be “for the detection, staging,”

Page 7, line 13 in the revised manuscript.

Page 6, line 44 should be “follow-up of a variety of malignant tumors”
Page 6, line 49 insert a space between “GISTs” and “[5]”; and should be “To the best of our knowledge”

Page 7, line 16 in the revised manuscript.

Page 6, line 54 should be “a patient with GS who exhibited increased FDG uptake”

Page 7, line 18 in the revised manuscript.

Page 6, line 56/57 confusing sentence. Consider removing “occasionally”

The sentence was corrected as “Yap et al. described a patient with histologically confirmed GS and non-Hodgkin’s lymphoma. 18F-FDG PET/CT was performed before and after treatment for lymphoma, showing increased uptake within the gastric lesion (SUVmax 4.9).” Page 7, line 18-21 in the revised manuscript.

Page 7, line 1 should be “showing an increased”

Page 7, line 21 in the revised manuscript.

Page 7, line 5 should be “at the greater curvature of the body of the stomach”

Page 7, line 22 in the revised manuscript.

Page 7, line 12-15 should be “by the tumor was significantly higher than that of other cases reported”

Page 8, line 1 in the revised manuscript.

Page 7, line 29 should be “Schwannomas originating in the stomach are seldom associated with ulceration.”

Page 8, line 8 in the revised manuscript.

Page 7, line 31/32 should be “within the submucosa of the lesser curvature of the stomach”
Page 8, line 9 in the revised manuscript.

Page 7, line 34 should be “with a central ulcer was misdiagnosed as a gastric malignant”

Page 8, line 10 in the revised manuscript.

Page 7, line 41/42 should be “of the stomach at the angular notch was shown”

Page8 , line 13 in the revised manuscript.

Page 7, line 44 should be “GC. However,”

Page8 , line 14 in the revised manuscript.

Page 7, line 46/47 should be “attested to be a reactive process. Although GS is a benign”

Page8 , line 15 in the revised manuscript.

Page 7, line 48/49 should be “uptake of GS was significantly increased,”

Page 8, line 16 in the revised manuscript.

We have clubbed the discussion page 6 para 2 and part of the page 8 para1, 2 together in the revised manuscript. So, the location of the revision below was changed in the revised manuscript

Page 8, line 1 insert a space between “GISTs” and “[5]”

Page 6, line10 in the revised manuscript.

Page 8, line 2/3 should be “which originate from mesenchymal tissue as well”

Page 6, line 10 in the revised manuscript.

Page 8, line 7 consider “Nevertheless,” instead of “Still,”

Page 6, line 12 in the revised manuscript.

Page 8, line 9/10 should be “can also be seen”
Reviewer reports:

Arvind Ahuja, M.D. (Reviewer 4): Tang et al report a case of gastric schwannoma, which in conjunction with multiple enlarged regional lymph nodes mimicked gastric cancer clinically. They have emphasized and discussed the role of FDG PET/CT in schwannoma.

I have following comments/queries from the authors:

1. Title of manuscript is not justified as FDG PET/CT imaging did not showed uptake in the enlarged lymph node, moreover 18F-FDG PET/CT was not diagnostic of schwannoma, therefore 18F-FDG PET/CT may be deleted.

Response: We thank the reviewer for the serious attitude to this study and the helpful suggestion. “18F-FDG PET/CT imaging of” was deleted in the title in the revised manuscript. (Page 1, line 2 in the revised manuscript.)

2. English language is not upto the mark. For example Page 4 line 15 and 17 ," It was sallow, tough and grown deep into the muscular layer", what do you mean?
Response: We sincerely thank reviewer for these excellent suggestions. We have corrected the expression “It was sallow, tough and grown deep into the muscular layer, but did not break through the serous.” with “The lesion was sallow, firm, and deeply entrenched in the muscular layer, without breaching serosa.” in revised manuscript (section case presentation, Page 4, line 15-16).

2. Page 6 line 5, Schwancytoma is old terminology please delete it.

Response: We sincerely thank reviewer for these excellent suggestions. We have deleted the “Schwancytoma” in the revised manuscript. (section discussion and conclusion, Page 6, line 2)

4. Page 6 line 54, delete 'with'.

Response: We sincerely thank reviewer for these excellent suggestions. We have deleted 'with' on Page 6 line 54 in the revised manuscript. (section discussion and conclusion, Page 7, line18)

5. "Yap et al. [9] reported a case of GS confirmed by pathology, which was occasionally found in a non-Hodgkin's lymphoma patient. 18F-FDG PET/CT was performed before and after treatment for non-Hodgkin's lymphoma, showing increased uptake of 18FFDG in the gastric lesion (SUVmax 4.9)." I don't understand this sentence, please explain.

Response: We thank the reviewer for the serious attitude to this study and the helpful suggestion. We have corrected the sentence with “Yap et al. described a patient with histologically confirmed GS and non-Hodgkin’s lymphoma. 18F-FDG PET/CT was performed before and after treatment for lymphoma, showing increased uptake within the gastric lesion (SUVmax 4.9).” in revised manuscript. (section discussion and conclusion, Page 7, line 18-21)

6. Differential diagnosis mentioned in discussion page 6 para 2 and page 8 para 1 may be clubbed together.

Response: We sincerely thank reviewer for these excellent suggestions. We have clubbed the discussion page 6 para 2 and part of the page 8 para 1 together in the revised manuscript (section discussion and conclusion, Page 6, para 2, line9-23 to Page 7 line1-8). Corresponding adjustments of references numbers were made in the revised manuscript. (section references, page 11)

7. As FDG PET/CT imaging prior to surgery did not showed uptake in the enlarged lymph node, the possibility of lymph node metastasis is less likely. Why repeat deeper biopsy or endoscopic USG guided FNAC was not performed to rule out non-epithelial or benign lesions.
Response: We really appreciate the reviewer’s serious attitude to this study. “Repeat deeper biopsy guided by endoscopic ultrasonography may be performed preoperatively, which was not considered because the ulcer border was fragile and bled easily. Maybe, it was the limitation of this case.” We have added this section in the revised manuscript. (section discussion and conclusion, Page 7, line 8-10)

Quadri Alabi (Reviewer 5):

The authors made significant correction to the initial queries. The English written of the manuscript has improved. Here are my comments;

-I think authors of this manuscript should write this abbreviation ”18F-FDG PET/CT” in full (fluorodeoxyglucose) in the title section.

Response: We thank the reviewer for the helpful suggestion. “18F-FDG PET/CT imaging of” was deleted in the title in the revised manuscript according to the advice of professor Arvind Ahuja (Reviewer 4).

- The authors need to write more about Gastric Schwannoma and Fluorodeoxyglucose (18F) in the introductory section. Also, there are many researches or case report articles on the Gastric Schwannoma, I will urge the authors of this manuscript to compare their finding to other published articles on Gastric Schwannoma and the significant of Fluorodeoxyglucose (18F), and their main take home finding that make this manuscript different from previously published articles on Gastric Schwannoma.

Response: We sincerely thank reviewer for these excellent suggestions. We have added a section of the gastric schwannoma and 18F-fluorodeoxyglucose PET/CT, and compared our finding to other published articles on Gastric Schwannoma in the introductory section (section background, paragraph 2, line 8-15; ) and our main take home finding in the section of discussion and conclusion(section discussion and conclusion, paragraph 3-6, page 7 line 25 to page 8 line24) The corresponding adjustments of references numbers were also made in the revised manuscript (section references page 11).

Very important.

-The authors should create a limitation section and explain the limitation of their case study.

Response: We really appreciate the reviewer for this helpful suggestion. See the revised manuscript. We have added a limitation section (“Repeat deeper biopsy guided by endoscopic ultrasonography may be performed preoperatively, which was not considered because the ulcer border was fragile and bled easily. Maybe, it was the limitation of this case. We expect our case report would contribute to the recognition of the biological characteristics of GS and to avoid
inappropriate under- or overtreatment of the patients in the future.”) in the revised manuscript.
(section discussion and conclusion, page 7, line 8-12.)