Author’s response to reviews

Title: Needle tract seeding recurrence of pancreatic cancer in the gastric wall with paragastric lymph node metastasis after endoscopic ultrasound-guided fine needle aspiration followed by pancreatectomy: a case report and literature review.

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Author’s response to reviews:

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Dear Dr. Lingling Tian,
Editor of BMC Gastroenterology

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Title: Needle tract seeding recurrence of pancreatic cancer in the gastric wall with paragastric lymph node metastasis after endoscopic ultrasound-guided fine needle aspiration followed by pancreatectomy:
Thank you for your letter inviting a revised manuscript. To that end, we enclose by Sato et al. "Needle tract seeding recurrence of pancreatic cancer in the gastric wall with paragastric lymph node metastasis after endoscopic ultrasound-guided fine needle aspiration followed by pancreatectomy: a case report and literature review."

We note the general enthusiasm by the reviewers and provide a point-by-point response to the helpful comments and insights. We hope this revised manuscript is deemed meritorious for publication as we believe the topic of needle tract seeding recurrence of pancreatic cancer is timely, engendering broad appeal to the gastroenterological community and the BMC Gastroenterology readership.

Sincerely yours.

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Reviewer 1

We greatly appreciate your constructive comments to improve our manuscript.

1. Was a pancreatic tumor invading the stomach on a preoperative CT image of pancreatic cancer? In the CT image of Fig.1, the tumor of the pancreatic body and the stomach wall were very close, and the possibility of direct invasion cannot be denied.

[Authors' reply for 1] We appreciate a meaningful comment. We showed the images at the time of initial pancreatectomy to deny the possibility of direct invasion in Fig. 1 of the revised manuscript (Case presentation section, line 67, page 4).

2. Please describe the product name of the EUS-FNA needle used for the diagnosis of the pancreatic cancer.

[Authors' reply for 2] We appreciate the reviewer’s comment. We added the information of the EUS-FNA needle in the revised manuscript (Case presentation section, line 61, page 4).

3. English grammar of the abstract is incorrect in several places and should be submitted for proofreading.

[Authors' reply for 3] The revised manuscript has been edited by “Editage” (www.editage.jp) for English language editing. Please refer to the attached certificate of English language editing.

Reviewer 2

We sincerely thank the reviewer so much for spending your valuable time to give us the meaningful and important suggestions, especially in the point of view of surgical treatment.
The authors only described operative procedure as distal pancreatectomy with lymphadenectomy. In this case report, operative findings are very important, stating the relationship between the stomach and the tumor, and whether peritoneal dissemination or ascites is found or not. Additionally, distal pancreatectomy is not appropriate. Distal pancreateosplenectomy or pancreatectomy with splenectomy is preferred. Is your procedure RAMPS anterior or posterior?

[Authors' reply for (1)] We thank to the reviewer’s comments. We added the information indicated above, and appropriately amended distal pancreatectomy to distal pancreateosplenectomy in the revised manuscript and Figure 1 (Case presentation section, line 64-74, page 4).

(2) It seems to me that the description of pathological findings is written according to Japanese classification of pancreatic cancer (6th edition). Is this correct? Histological findings should be also provided, because you only show us the histology of the stomach tumor.

[Authors' reply for (2)] As the reviewer points out, it was described based on the 6th edition of Japanese classification of pancreatic cancer. We amended it to the correct one including the histological findings with the 7th edition in the revised manuscript (Case presentation section, line 67-73, page 4).

(3) In Figure 1a, only pancreatic tumor is shown; however, postoperatively paragastric lymph node swelling developed as shown in Figure 1c. Therefore, preoperative CT images are additionally required to show us that there are no lymph nodes swellings around the stomach. In fact, Figure 1a shows us a small round mass near the stomach. Is this a lymph node or not. Anyway, more preoperative CT images should be shown us. You mentioned like a mass in body of the pancreas with dilatation of the main pancreatic duct, but you did not show us the image of dilatation of the main pancreatic duct. I recommend that figure 1 is used for preoperative CT images and that figure 2 is for postoperative images.

[Authors' reply for (3)] We appreciate the reviewer’s suggestion. As the reviewer’s recommendation, we added images of the initial operation to show that a small round mass near the stomach was not swollen lymph nodes in the revised Fig. 1b. Fig. 2 was amended to present the postoperative images in the revised version.

(4) You mentioned that partial gastrectomy and lymphadenectomy were performed. What kind of partial gastrectomy did you perform? What extend of lymphadenectomy did you perform? You should describe operative procedure more precisely.

[Authors' reply for (4)] As the reviewer’s suggestion, conversion surgery is usually We added the information about gastrectomy more precisely (Using an electrosurgical knife, all layers of the stomach located with the gastric tumor was resected with a certain margin: Case presentation section, line 83-85, page 5) and amended the term, “lymphadenectomy “ to “lymph node resection “ in the revised manuscript.

(5) The following sentence, "no recurrence was observed for 5 months", should be changed to "no recurrence was observed for 5 months at the time of this writing"

[Authors' reply for (5)] We thank to the reviewer’s comments. We added “at the time of this writing” as the reviewer suggested in the revised manuscript. (Case presentation, line 91, page 5)

[Authors' reply for (6)] We appreciate the reviewer’s suggestion. As the reviewer’s suggestion, the first case report was the article written by Hirooka. We added this information in the revised manuscript (Discussion section, line 97, page 6), and amended the content of Table to correct the information and add the additional reports in the revised Table 1.