Author’s response to reviews

Title: Resection of a huge mediastinal well-differentiated liposarcoma involving left thoracic cavity

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Author’s response to reviews:

Dear Dr. Zamvar:

We would like to thank the editor for giving us a chance to revise the manuscript, and also thank the reviewers for giving us constructive suggestions which would help us in depth to improve the quality of the paper. Here we submit a new version of our manuscript with the title “Resection of a huge mediastinal well-differentiated liposarcoma involving left thoracic cavity”, which has been modified according to the reviewers’ suggestions. Efforts were also made to correct the mistakes and improve the English of the manuscript. We marked all the changes in red in the revised manuscript, and we also responded point by point to reviewer comments as listed below.
The following is a point-to-point response to the reviewer comments.

Reviewer #3:

1) The manuscript has some grammatical and language mistakes that should be revised and corrected.
   - Answer: Thanks for the suggestion. Efforts were made to correct the mistakes and improve the language in the revised version of the manuscript.

2) The authors did not mention any special technique or a new technique for the management or surgical resection of this mass.
   - Answer: Thanks for the suggestion. The essential of the operation was to expose the tumor clearly and to resect it completely, and the technical key point of excising such a huge mass is to find the pedicle of the tumor in the first place.
   - Changes: An independent paragraph regarding the technical key points of the operation had been added to the discussion section.

3) The eight month follow up is not a long period for deciding for good control of the disease.
   - Answer: Thanks for the suggestion. It is one of the limitations of this case that the follow-up period is not long enough. We had kept close contact with the patient, and will keep a watchful eye on the prognosis of this patient in a longer period of follow-up.

4) There is no photo for postoperative follow up either CXR or CT.
   - Answer: Thanks for the suggestion. We had added Chest X ray and CT images of the patient 8 months after the surgery.
   - Changes: Images of the follow-up CXR and CT had been added in the revised manuscript.
Reviewer #4:

1. a better revision of the English language, maybe an Editing to American Journal Experts could help you to improve the language.

   - Answer: Thanks for the suggestion. Efforts were made to correct the mistakes and improve the language in the revised version of the manuscript.

2. I would add more details about the patient especially regarding the postoperative course. We have no data related to that.

   - Answer: Thanks for the suggestion. The patient received routine treatment and nursing postoperatively. The chest drainage was removed on the 6th day after the surgery, and the patient was discharged on the 7th day after the surgery. The patient kept regular follow-up with chest X ray and CT scan.

   - Changes: Related content had been added to the case report section.

3. I would also add CT or chest x ray after 8 months from surgery, as follow up.

   - Answer: Thanks for the suggestion. We had added Chest X ray and CT images of the patient 8 months after the surgery.

   - Changes: Images of the follow-up CXR and CT had been added in the revised manuscript.

4. If you have done FISH test, it could be nice to show a picture related to that.

   - Answer: It’s a pity that our pathological department had not kept a photograph copy of the FISH test result. Despite that, we believe that the histologic examination images in our manuscript might be also valuable for pathologists.
Thank you and best regards.

Yours sincerely,

Zhengliang Wei

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