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Reviewer A

In this review article, palliative care for cancer in pregnant women is summarized, focusing on the pros and cons of opioids use. So, this manuscript was meaningful study for daily training and medical practice. However, I think that this manuscript needs some revisions.

I think it is very well written.

I believe one of the goals of palliative care for pregnant women is to prolong the fetus' gestational period. Please mention this point as well.

We thank the reviewer for the kind comments. We have now revised the manuscript to add the following sentence in the discussion section (page 9, para 3). "The goal of pain management is not only to improve the quality of life of the pregnant patient but also to prolong the gestational period."

Reviewer B

This is a case reports with an extensive narrative review of available literature in cancer diagnosis, treatment safety/risks, etc. cancer pain management, Relative to wide area of the narrative review, the case description ended with a short intervention by the palliative care team at 23 weeks pregnancy but lacking detail for follow up especially the challenge to maintain opioid therapy safely until delivery while experiencing physiological change over time, the type of treatment of cancer that was safely delivered at this stage of pregnancy, and the post partem care as well as management of the neonatal abstinence syndrome.

Based on the reviewers comments we have now revised the manuscript (case report) to add details of the follow-up after the Palliative care consultation (page 5, para 2). We also added details in the discussions the challenges of provision of palliative care including opioid management in this population especially in low- and middle-income countries such as Kenya (page 10, last para).

1. Non-pharmacological management review seems to be lacking either in case description or in the narrative review.

Based on the reviewers comments we have now added details of non-pharmacological management (page 11, para 3).

2. Authors are strongly encouraged to consider re-using their source of references appropriately. For example Line 72 73: Many pregnant women experience pain with some having chronic pain prior to 73 pregnancy.[9-11]; 78: more than death itself.[2, 11]; 80,81: Many pain management teams decline to manage pregnant women for pain and refer them back to the obstetricians.[9]; 216-220: (ref [9] is not the actual Canadian Guideline but it references 2011 Canadian Guideline, while there is newer version available); and line 254 uses [27] which target population is post-partum.

Based on the reviewers comments we have now changed the references in the revised manuscript.

3. Pls also review typographical errors in both case description and narrative review.

Based on the reviewers comments we have revised manuscript to correct the typographical errors in both case description and narrative review.