

ANNALS OF PALLIATIVE MEDICINE

Peer Review File

Article Information: <http://dx.doi.org/10.21037/apm-20-630>

Round 1

Review Comments:

This manuscript shared a rare case of primary pulmonary artery sarcoma which successfully diagnosed with 18 F-FDG PET/CT. Though this case is quite rare, there are quite a lot of concerns.

1. Add "case report" as one of the keywords too.

Reply 1: According to your suggestion, "case report" was added as the key word in our manuscript.

Changes in the text: Please refer to the part of key word in the Page 2, line 42.

2. In the abstract, I fail to see what's unique of this case. The uniqueness is different from rareness. Please compare your case with published ones and point out the significant differences.

Reply 2: Thank you very much for your valuable comments, "significant differences" was added to the manuscript.

Changes in the text: Different from published reports, our case received both enhanced CT and 18F-FDG PET/CT examination before the pathologic result, and lung metastases had already occurred at the time of diagnosis. Please refer to page1-2, line20-22.

3. In the introduction, more researches introduction are needed. Though using 18F-FDG PET/CT to detect the disease is even rarer, we do have read a few cases. Please introduce these cases first and then carry out why this case is different from those.

Reply 3: According to your suggestion, brief introduction the use of 18F-FDG PET/CT in PAS was added to the manuscript.

Changes in the text: Only a few case reports have described these lesions, but all these cases were misdiagnosed as pulmonary embolism or pneumonia at initial diagnosis with the imaging manifestations of FDG high uptake on PET/CT, and finally confirmed as PAS by postoperative histopathological results. Please refer to page3, 47-51;54-55

4. Please note in the discussion that this case report is written in accordance with the CARE GUIDELINE.

Reply 4: According to your suggestion, "written in accordance with the CARE GUIDELINE" was note in the manuscript.

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Changes in the text: Change 1, A scientific discussion of the strengths AND limitations associated with this case report. Please refer to the “the strengths AND limitations” in the Page8, line 149-157.

Change 2, Discussion of the relevant medical literature with references. Please refer to the” relevant medical literature with references” in the page 6, line111-114,116-120.

Change 3, The scientific rationale for any conclusions (including assessment of possible causes). Please refer to the” scientific rationale for any conclusions” in the page8, line157-162.

Change 4, The primary “take-away” lessons of this case report (without references) in a one paragraph conclusion. Please refer to the” lessons of this case report (without references) in a one paragraph conclusion” in the page8, line162-168.

5. Add history (e.g. family) in the case presentation.

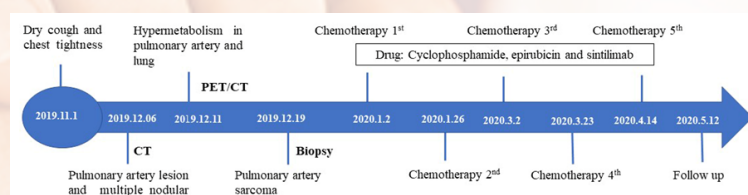
Reply 5: According to your suggestion, the relevant medical history of this case was added in the manuscript

Changes in the text: Please refer to the “additional history” in the Page 4, line 79-82

6. Draw a timeline (a figure) along with precise time to outline the whole procedure. Meanwhile, precise time is needed in the manuscript at every stage correspondingly too.

Reply 6: According to your suggestion” a timeline of clinical history and precise time” was added to the manuscript.

Changes in the text: Please refer to the “a timeline of clinical history and precise time” in the page 3/line 58-60, and as follows:



7. For each medication, name, dosage and duration details are required.

Reply 7: According to your suggestion, each information about medication, name, dosage and duration details were added to the manuscript.

Changes in the text: she received chemotherapy with cyclophosphamide 1.2g per day and epirubicin 80mg per day for 5 courses of chemotherapy. At the same time, she received immunotherapy with sintilimab 100mg per day 5 courses of chemotherapy, and is in the hospital for six-cycle chemotherapy. Please refer to the page 6, line107-111.

8. In the discussion, I failed to find the strengths and limitations of this case COMPARED TO similar

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cases. Please use one separate paragraph to highlight this. An in-depth discussion with published literature is essential.

Reply 8: According to your suggestion, “the strengths and limitations of this case COMPARED TO similar cases” was further discussed in our manuscript

Changes in the text: Please refer to the “one separate paragraph to highlight this” in the Page 8/line 158-181.

9. Very importantly, patient consent is requested.

Reply 9: Informed consent was gained from this patient.

Changes in the text: Please refer to the upload file of “patient consent” in submission system and the Page 10, line 194-197.

Round 2

Review Comments:

1. In the timeline, add more detailed outcome (what's found) in addition to what's done. For example, how is the prognosis? Is there any adverse events during follow-up? More detailed response information regarding chemotherapy 1st, 2nd, 3rd, 4th and 5th etc.

Reply: The patient is still being followed up on August 25, 2020 and her general condition is well, no adverse events occurred during the follow-up period. During the 5 courses of chemotherapy, the patient was well tolerated and no obvious discomfort was observed. Please refer to the part of “case presentation” in our manuscript.

2. “We present the following article in accordance with the Annals of palliative Medicine reporting checklist.”

RE: We present the following article in accordance with the CARE guideline checklist.”

Reply: Thank you for your guidance. New CARE guideline checklist was uploaded. Please refer to submission system.

Round 3

Review Comments:

The patient is still being followed up on August 25, 2020 and her general condition is well, no adverse events occurred during the follow-up period. During the 5 courses of chemotherapy, the patient was well tolerated and no obvious discomfort was observed. Please refer to the

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part of “case presentation” in our manuscript.

Comments: This information is great. However, the timeline should stand alone. Therefore, put this information in the timeline.

Reply: thanks for your suggestion, the figure of timeline was updated.

Changes in the text: please refer to the figure 1.

