

## Peer Review File

Article information: <https://dx.doi.org/10.21037/tcr-23-2276>

### Reviewer A

The authors of this manuscript presented the case of a 58yo woman with a lung metastatic recurrence of sclerosing epithelioid fibrosarcoma treated with 3 surgery interventions to remove several pulmonary nodules. Final diagnosis was confirmed by means of immunostaining. Following disease progression, chemotherapy with doxorubicin together with pazopanib was initiated, achieving stabilisation of lesions. Upon progression, radiotherapy was administered, achieving pain control and ultimately size reduction in all metastatic lesions, even in those that were not irradiated.

The manuscript is of interest since it presents the case of a SEF, a very rare sarcoma histotype with no defined treatment options, with a spontaneous remission after failure of several chemotherapeutic treatments. Besides anti-SARs CoV-2 vaccination, the patient received 5 cycles of radiotherapy which may have led to immune system activation within the micro-tumoral environment.

However, few suggestions are provided below to improve the paper:

- 1) English should be revised, several grammar mistakes are present throughout the manuscript and several sentences are unclear
- 2) a scheme depicting a timeline with main episodes of care of the patient would be helpful for readers to gain a first sight overview about the case
- 3) the role of systemic inflammatory markers in predicting STS prognosis should be considered (doi.org/10.1038/s41598-018-30442-5, doi: 10.1002/ijc.28677). An analysis of these markers would have been interesting. Indeed, it is known that the intratumoral and inflammatory systems significantly influence tumor aggressiveness and recently this was confirmed also in STS patients receiving second-line treatment after progression to first-line anthracycline-based treatment (doi.org/10.3390/cancers15041080). Please add a brief paragraph to discuss this topic with relevant references.

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**Comment 1:** English should be revised, several grammar mistakes are present throughout the manuscript and several sentences are unclear

**Reply:** We reviewed the article with an online English grammar corrector (available at: [https://languagetool.org/es/corrector-ortografico-ingles?utm\\_source=google&utm\\_medium=cpc&utm\\_campaign=GA\\_LT\\_ES\\_es\\_Sales\\_KW\\_Generic\\_ROAS-200\\_0Value&utm\\_content=&utm\\_term=corrector%20de%20ingles&gad\\_source=1&gclid=Cj0KCQiA5fetBhC9ARIsAP1UMgHmV8icHUukT-1CbBPGL5rFFXMwKxLe5HaeFMVNMryYavrUFrc\\_3PFoaAs-KEALw\\_wcB](https://languagetool.org/es/corrector-ortografico-ingles?utm_source=google&utm_medium=cpc&utm_campaign=GA_LT_ES_es_Sales_KW_Generic_ROAS-200_0Value&utm_content=&utm_term=corrector%20de%20ingles&gad_source=1&gclid=Cj0KCQiA5fetBhC9ARIsAP1UMgHmV8icHUukT-1CbBPGL5rFFXMwKxLe5HaeFMVNMryYavrUFrc_3PFoaAs-KEALw_wcB))

**Changes in text:** I have sent two documents: one with all the corrections done and no comments, and the other with comments that mention all the modifications done.

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**Comment 2:** A scheme depicting a timeline with main episodes of care of the patient would be helpful for readers to gain a first sight overview about the case.

**Reply 2:** it has been added as figure 3.

**Changes in the text: figure 3.**

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**Comment 3:** the role of systemic inflammatory markers in predicting STS prognosis should be considered ([doi.org/10.1038/s41598-018-30442-5](https://doi.org/10.1038/s41598-018-30442-5), doi: 10.1002/ijc.28677). An analysis of these markers would have been interesting. Indeed, it is known that the intratumoral and inflammatory systems significantly influence tumor aggressiveness and recently this was confirmed also in STS patients receiving second-line treatment after progression to first-line anthracycline-based treatment ([doi.org/10.3390/cancers15041080](https://doi.org/10.3390/cancers15041080)). Please add a brief paragraph to discuss this topic with relevant references.

**Reply 2:** a paragraph about this matter has been added at the end of discussion

**Changes in the text:** a paragraph about this matter has been added at the end of discussion

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## **Reviewer B**

I enjoyed reading this interesting case report. This is well written and worthy of publication.

1. The authors should discuss the role of checkpoint inhibitors in sclerosing epithelioid fibrosarcoma. Could the authors discuss the potential immune mechanisms in this sarcoma subtype.

a. Doshi SD, Oza J, Remotti H, Remotti F, Moy MP, Schwartz GK, Ingham M. Clinical Benefit From Immune Checkpoint Blockade in Sclerosing Epithelioid Fibrosarcoma: A Translocation-Associated Sarcoma. *JCO Precis Oncol.* 2021 Nov;5:1-5. doi: 10.1200/PO.20.00201.

b. Abstract presented at ASCO 2023 by DrWilkey

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**Reply 1:** a paragraph about this matter has been added at the end of discussion

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