## Peer Review File

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## For reviewer A

Comment 1: mechanism of rupture: the authors indicate that a rise in intratumoral pressure is the probable cause of the rupture. Another possibility is that the surrounding wall was weakened and thin due to necrosis and inflammation which may give rise to subsequent rupture. The latter mechanism is also observed in necrotic squamous cell carcinoma of the lung. Moreover (page 7 line 11), a thymic cyst was also present which may easily rupture in case of hemorrhage, inflammation or infection. These mechanisms should also be mentioned.

Reply 1: Thank you for your comment. In accordance with your comment, we have stated that weakening and thinning of the surrounding wall due to necrosis and inflammation could be another cause of rupture in the revised manuscript.

Changes in the text: We have modified our text as advised (see Page 3, third and last key findings Page5, line4-6, Page11, line13-15, Page12, line16-20,23-25)".

Comment 2: page 8 1st paragraph: regarding pathologic examination, did the bloody pleural fluid contain metastatic cells? Was a R0 resection obtained? What was the TNM stage of the thymoma? Clinically, was any adjuvant therapy given? What was follow-up and final outcome in this case?

Reply 2: Thank you for your comment. We did not collect pleural fluid intraoperatively for cytological examinations. However, we judged that gross R0 resection was achieved. The pathological stage was pT2N0M0 Stage II. The patient did not receive any adjuvant therapy and has been recurrence-free for 1 year postoperatively. Changes in the text: We have modified our text as advised (see Page8, line7-10, Page9, line21)

Comment 3: - page 5 line13 "asymptomatic": this is not correct as in patients with myasthenia gravis a tumor may be detected at an early stage

Reply 3: Thank you for bringing this error to our notice. As stated by the reviewer, the use of "asymptomatic" in this context is incorrect. We have revised the sentence accordingly.

Changes in the text: We have modified our text as advised (see Page5, line12-13)

Comment 4: - English language and grammar should be thoroughly corrected by a native English speaker. Examples include:

- 1. title contains "case" 2 times
- 2. first key finding: "states" to be replaced by "describes"
- 3. last key finding: "and the subsequent ruptured" to be replaced by "with subsequent rupture"
- 4. page 4 line 3 and page 5 line 14: "the mechanism ruptures" to be replaced by "the mechanism of rupture"
- 5. page 5 line 5: "and subsequently rupture" to be replaced by "and subsequent rupture"
- 6. page 4 line 14 and page 7 line 2: "Her median sternotomy" to be replaced by "Median sternotomy"

Reply 4: Thank you for bringing this matter to our notice. In accordance with your comment, we have had the manuscript re-edited by a native English speaker.

Changes in the text: We have modified our text as advised (see Page1, line3, Page3, first key finding and last key finding, Page4, line3, 14, Page5, line14, Page8, line2,)

## For reviewer B

Comment 1: Uebayashi et al report a case of a ruptured thymoma due to tumor necrosis and hemorrhage. While the rupture of thymoma is not very commonly seen in the clinic, large thymic masses do have a well-known tendency for regressive changes and hemorrhage. Cases of ruptured thymoma and consecutive hemothorax are therefore already quite frequently reported in the literature.

While the case is thoroughly reported, I remain unconvinced of its novelty and educational value. Mainly, I feel that the conclusion and take-home message of the case is very slim as there is no implication regarding the clinical management of patients with ruptured thymoma.

Due to the low educational value of the case reported here, I have to recommend rejection of the manuscript.

Reply 1: Thank you for your careful review of our manuscript. Although the rupture of thymoma is not uncommon, previously reported cases have not alluded to the

mechanism of the rupture. In contrast, this case report analyzed the mechanism of thymoma rupture based on the pathological findings. We have emphasized the educational value of this case report in the manuscript accordingly.

Changes in the text: We have modified our text as advised (see Page 12, line 18)