Covering letter for R1 version

Dear Editor-in-Chief, Dr. Subrata Ghosh and Dr. Andrzej S Tarnawski:

Thank you very much for having considered our manuscript (Manuscript NO: 66914). I am very pleased to see the constructive comments of reviewer and science editor. Reviewer #1 raised 2 comments and science editor raised 1 comment, respectively. I fundamentally agree with all these comments and incorporated them to the R1 version. Red indicates the parts that I changed according to Reviewer #1. According to these changes, I added some sentences to make the context clear, which are indicated in green. I also deleted some redundant parts, which I described in the "Response to Reviewers" section. The native medical profession and I linguistically checked the manuscript once again, and I changed or deleted very small parts. They are very trivial points (some words or a single sentence) and thus I did not indicate them to avoid complexity. Otherwise, I did not touch the original manuscript.

Due to the incorporation of Reviewer’s advice, volume of the R1 version little expanded. Sorry for this.

I hope that you would evaluate this R1 version positively.

Response to Reviewer and science editor

Red indicates the parts that I changed according to Reviewer #1. According to these changes, I added some sentences to make the context clear, which are indicated in green.

To Reviewer #1

Thank you very much for giving me good advices. I agree with you and have incorporated these advices to R1 version (red color).

1. What was the first instrumental examination you performed: EGD or CT? According to the abstract, it looks like EGDS, however the case presentation part Imaging examinations you started with CT.

Thank you for pointing that out. At the time of the patient’s first visit, we suspected upper gastrointestinal bleeding, so we first performed an emergency EGD. And it
showed an ulcerative lesion with a large blood clot in the horizontal part of the duodenum. Based on the location and shape of the ulcer, we suspected not only a peptic ulcer, but also an ulcer caused by vascular malformation or malignancy, so the endoscopy was interrupted and contrast-enhanced CT was performed. As a result, vascular lesions were ruled out, and hemostasis was continued with EGD. The description of image examinations was added in CASE PRESENTATION (Imaging examinations) section. In addition, Figure reordering and numbering has been corrected to reflect this change.

2. Please provide the abbreviation’s explanation under table 1 and the normal ranges of your laboratory.
   I agree with you. I described the abbreviation’s explanation under table 1, and added normal ranges of our laboratory (Table 1, in red color).

To science editor

   Thank you for your comment. I agree with your advice and incorporated it to R1 version.

The title is too long, and it should be no more than 18 words.
   I agree. I changed the main title.

Finally, the abbreviations used in the figure legends are defined.

I believe that incorporating your advice into R1 version has made the manuscript better. Thank you once again.

Sincerely yours,

Sotaro Ozaka, M.D.
Department of Gastroenterology, Faculty of Medicine, Oita University.
1-1 Idaigaoka, Hasama, Yufu, Oita 879-5593, Japan
Telephone: 097-586-6193; Fax: 097-586-6194
E-mail: ozakaso@oita-u.ac.jp