Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 74246_Auto_Edited.docx).

Title: An unusual case of primary gastric dedifferentiated liposarcoma resected endoscopically

Authors: Joon Hyun Cho, Jun Hyeon Byeon, Si Hyung Lee

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 74246

Thank you very much for your kind comments. We tried to revise the manuscript as much as possible according to the suggestions made by the reviewers and the Editorial Office’s comments and suggestions, and enclosed revision detail and revised manuscript. We hope all these revisions will be satisfactory.

The manuscript has been improved according to the suggestions of reviewers and the Editorial Office’s comments and suggestions:
1 Format has been updated
2 Revision has been made according to the suggestions of the reviewer and the Editorial Office’s comments and suggestions

Answers to Reviewer No. 03515222
This case report showed us An unusual case of primary gastric dedifferentiated liposarcoma resected endoscopically. The article was well-written and showed us a rare case of gastric liposarcoma. It reminded us when diagnosing unexplained masses in the stomach, there is some possibility of liposarcoma in the stomach, and endoscopic resection is helpful for the diagnosis and treatment of the disease. However, the etiology and pathogenesis of this tumor in the stomach deserve further investigation.

Answer) I really appreciate your valuable comments.

Answers to Reviewer No. 02451447
The authors reported one rare gastric dedifferentiated liposarcoma. The paper is well written and has a value to be published.

(1) What does that mean "vertical" resection margin? You meant deep margin or others?

Answer) It meant deep margin. As your comment, it is better to change "vertical" resection margin to “deep” resection margin in the manuscript. Thank you very much.

(2) In the discussion, the authors should discuss how the possibility of metastatic DL was excluded.
Answer) Distant metastases of soft tissue sarcomas are mostly hematogenous, and occur commonly in liver and lungs, and most such patients eventually develop disseminated disease. In the present case, there were no abnormal findings in other organs on CT scan and DL presented as a small single lesion only in the stomach. Therefore, we judged this case as primary gastric DL rather than metastatic DL.
We understand what your comment means. However, there was no specific method to exclude the possibility of metastatic DL, it was very difficult for us to describe it in the discussion. We hope your generous understanding. If you provide additional comments, we will gladly revise the paper accordingly.

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*

Sincerely yours,

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