Dear Editor and Reviewers:

We sincerely thank the editor and all reviewers for their valuable feedback that we have used to improve the quality of our manuscript. All of us authors have carefully read the comments that you have given us, and have discussed and revised each of these issues. The reviewer comments are laid out below in italicized font and specific concerns have been numbered. Our response is given in normal font and changes/additions to the manuscript are given in the yellow text.

1. *There is no background in the manuscript;*

   Thank you for your advice. The article has been supplemented with background content.

2. *The authors need to add new references, and they used few references.*

   Thank you for your advice. New references have been added to the article.

3. *Table(s)*

   Thank you for your advice. The table has been modified as needed (the standard three-row table) and has been uploaded as a separate document.

4. *Language evaluation: the manuscript is written a little bit carelessly, the style, language and grammar require corrections.*

   Thank you for your advice. We have invited a native English speaker to help polish our article. We hope that the revised manuscript will be
accepted by you.

5. Please add the Core tip section.

Thank you for your advice. A core tip section has been added to the article. For details, see on page 4. The characteristics and prognosis of Exogenous insulin autoimmune syndrome (EIAS) were summarized briefly.

6. Please provide the PubMed numbers and DOI citation numbers.

Thank you for your advice. It has been modified as requested.

7. The “Case Presentation” section was not written according to the Guidelines for Manuscript Preparation.

Thank you for your advice. The case Presentation section has been modified in accordance with the manuscript preparation guidelines, and sections for "final diagnosis," "treatment," and "outcome and follow-up" have been added to the main text. In addition, a FURTHER DIAGNOSTIC WORK-UP section was added, which further described the diagnosis and treatment process of the patient and supplemented the HLA results of the patient.

8. The structure of Abstract does not meet the requirements. The abstract includes three parts: "BACKGROUND", "CASE SUMMARY", and "CONCLUSION".

Thank you for your advice. The structure of the abstract has been revised according to the requirements. It is divided into three parts:
background, case summary and conclusion.

9. *The analytical results are really difficult to understand.*

After reviewing the relevant literature, we improved the discussion by adding the role of genetic susceptibility in insulin autoimmune syndrome (IAS) and human leukocyte antigen (HLA) typing in different IAS populations. At the same time, we reorganized the discussion section, adjusted the order of paragraphs, and added the content related to genes, but the rest of the general content was not significantly modified to facilitate the understanding of the analysis results.

We tried our best to improve the manuscript and made some changes marked in yellow in the revised paper, but it will not affect the results of the paper. We appreciate for editors/reviewers warm work earnestly and hope the correction will meet with approval. Once again, thank you very much for your comments and suggestions.