

ANSWERING REVIEWERS



March 31, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 16651-Edited.doc).

Title: Current status and progress of pancreatic cancer in China

Author: Quanjun Lin, Feng Yang, Chen Jin, De-Liang Fu

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 16651

The manuscript has been improved according to the suggestions of reviewers and our answers appear in red in the text.

1 Format has been updated.

2 Revision has been made according to the suggestions of the 2 reviewers:

Reviewer 1: All his/her suggestions have been considered.

(1) Descriptions about risk factors and screening of early pancreatic cancer may look threadless. No comments on consensus and/or references. The paragraph "Other risk factors" does not contain any genetic pancreatic cancers and pancreatic cystic lesions.

We highly appreciate the reviewer's concern. In the revision, parts of the sections of risk factors and screening of early pancreatic cancer have been re-written. The references of a)-h) individuals as high-risk patients have been supplied. In addition, we add a subsection of "genetic risk factors" in the revised manuscript. We also add some discussions about pancreatic cystic lesions in the paragraph "Other risk factors".

(2) If the author shows the comparison of % numbers of patients diagnosed at stage I/II and III/IV with other countries like the US, it may be more interesting.

We agree with the reviewer's suggestion. We compare the values with the data from a recent study, in which the authors analyzed 13,131 patients with pancreatic ductal adenocarcinoma between 2004 and 2011 in the NCI SEER database. They found that 62.9% of pancreatic cancer patients received diagnoses at stages I or II, and 37.1% at stages III or IV.

(3) Be better to describe consistent comments on EUS.

This clarification has been made in the revised manuscript. EUS has commonly used in the western countries, but application of EUS especially EUS-FNA in China is limited.

(4) I could not understand why the author comments on liver metastasis after colorectal cancer surgery (ref 75).

We highly appreciate this comment and remove the ref 75.

Reviewer 2: All his/her suggestions have been considered.

(1) To improve the potential interest for readers, I recommend that the review is divided in sections and subsections.

We highly appreciate this comment and agree with the reviewer's suggestion. We have divided this review in sections and subsections in the revised manuscript as follows: 1.Epidemiology worldwide, 1.a Epidemiology in China, 1.b.Incidence & mortality; 2. 2.Risk factors of pancreatic cancer in China 2.a Tobacco, etc.; 3.Screen for early pancreatic cancer, 3.a Imaging, 3.b molecular markers.; 4. Diagnosis; 5. Therapy, 5.a Surgery, 5.b Chemotherapy and targeted therapy, 5.c 5.c.Radiation therapy and traditional Chinese medicine; 6.Pancreatic cancer research in China; 7. Challenge and future direction.

(2) The screening potential of imaging should be described in more clinical details.

We agree with the reviewer's suggestion. We have described more about the use of imaging modalities such as CT, MRI, MRCP, and EUS in the revision.

(3) In the clinical studies described, the number of patients analyzed in the trials should be reported.

We adopt the suggestions, and add the number of patients and some main results in the clinical trials.

(4) Some minor English language mistakes were recorded.

We have corrected some English language mistakes and provided language certificate by the professional English language editing company.

3 References and typesetting were corrected.

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

Sincerely yours,

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