

Rev #1

This article summarizes the evidences available to date about the applicability of a subclassification system for intermediate HCC patients to tailor therapeutic interventions. It would be better to add other scoring systems such as the Hepatoma Arterial Embolization Prognostic (HAP) score and the Selection for TrAnsarterial chemoembolisation TrEatment (STATE) score to enrich the contents.

Answer.

We added the discussions about HAP and STAE scores.

Rev#2

HCC is a complex disease with limited therapeutic options. Stratification of intermediate HCC patients, BCLC stage B, is relevant as they display different responses to TACE, likely resulting from their heterogeneity. The review is written in a comprehensive manner and summarizes evidences leading to the conclusion that sub-clasification of patients is possible and would allow prediction of those cases who will respond better to TACE and tailor more efficient treatments for patients with worse prognosis.

Answer.

Thank you.

Reviewer#3

Nice review. It should contain the Table with these subclassifications with comparison of the therapeutic options and outcome. It is difficult from the text to keep in mind different percentages (median) of outcome.

Answer.

We have already described the median survival times after TACE based on subclassifications on tables 1 and 2. There are few data on survival after other therapeutic options besides TACE in BCLC-B stage HCC patients. We understand what you mentioned, but we hesitate to do so.