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Manuscript Type: Editorial

Sentinel lymph node metastasis after neoadjuvant treatment in breast cancer:
Any size matters?

To the Editor in chief:

Thank you for reviewing the manuscript. Enclosed is the answer to the reviewers.

1. Running title, author contributions and conflict of interest have been added to the manuscript
2. Core tip has been added and audio has been sent
3. References have been changed to fit into the Journal

Reviewer comment 1:

This study is an absolutely up-to-date question. Author concluded that any size of metastasis in the SLN following neoadjuvant chemotherapy is important therefore reduce the false negative rate of SLN pathology is essential. My question is that how ypN0(i+/-) can influence adjuvant radiotherapy in case of cN1C2(PET/CT)?

Response.

I do not think we can answer that question yet. It is possible that response to chemotherapy predict for the potential benefit of regional radiotherapy. Whether we can reduce locoregional therapies in responders, it is still a debate. Patients with cN1/N2 who convert to ypN0 (i+) are patients with a good response to chemotherapy but still with residual disease. There are several ongoing trials that will define subgroups of patients who benefit from locoregional therapies after neoadjuvant treatment (NSABP B-51/RTOG or Alliance A11202). The survival benefits of radiation therapy in those patients who are good responders or with minimal residual disease to systemic therapies are still unanswered.