

Reviewer 1

This is a well-designed meta-analysis article. The chemoprevention of CRC in IBD patients is a great interest and this study is very valuable. As authors said, the present study cannot demonstrate the significant effect of NSAID including aspirin on the prevention of CRC in IBD patients, but it's because there were no RCTs concerning the theme and most studies were lacking in detailed data. Authors were able to reveal what is already known now and what should be assessed in the future. Minor comments 1) In Figure 1, maybe the number of the articles on NA-NSAIDs is 6, not 7, isn't it?

Thank you very much for your kind comments. We have updated figure 1 as suggested.

Reviewer 2

This article is written well. This meta-analysis doesn't include high quality study, however many researchers seem to be interested in whether aspirin drugs reduce risk of CRC. It is widely known that aspirin reduce in risk of CRC. In addition, Japanese RCT was reported in 2014; aspirin drugs reduced colorectal tumor recurrence in an Asian population. I consider quite good for statistical procedure. The authors provide important negative data.

Thank you very much for your kind comments.

Reviewer 3

Dr Burr and Colleagues performed a very detailed meta analysis and systematic review in which they analyzed whether aspirin and non aspirin NSAIDs are associated in prevention of CRC in IBD patients. the Authors performed their analysis very well including discussion of limitations. The Authors state that in the light of current data thee is no evidence of chemo prevention of Aspirin or non aspirins NSAIDs in pts with IBD.

Thank you very much for your kind comments.