

## ANSWERING REVIEWERS



August 23, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format.

**Title: PERITONEAL CARCINOMATOSIS**

**Author:** Federico Coccolini, Federico Gheza, Marco Lotti, Salvatore Virzì, Domenico Iusco, Claudio Ghermandi, Rita Melotti, Gianluca Baiocchi, Stefano Maria Giulini, Luca Ansaloni, Fausto Catena.

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 4616

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

(1) Some authors reported the peritonectomy in patients with pseudomixoma peritonei and gastric cancer. Although the usefulness of surgical approach, information of it should be described. DONE

(2) In gastric and some other cancers with peritoneal carcinoma, the intraperitoneal administration of taxanes antitumor agents is one of the topics. The authors should be considered. IN OUR OPINION THE DISCUSSION ABOUT THE USE OF TAXANES EXULATES FROM THE AIM OF THE PRESENT REVIEW.

(3) Does the author think that the treatment should be changed in levels of dissemination? INDICATION HAVE BEEN DONE

(4) The levels of dissemination are divided into macroscopic dissemination, cytological dissemination and molecular dissemination. The informations of diagnostic approach should be shown. DONE

(5) The authors emphasized the usefulness of HIPEC. However, it is thought that HIPEC is not a general approach for peritoneal carcinomatosis. Explanation is necessary in detail about HIPEC. DONE

(6) One of the problems with systemic chemotherapy is the limited delivery of systemically administered drugs to the peritoneal cavity, because there is the peritoneal-plasma barrier in peritoneum. The pathological structure of the peritoneum is important to explain peritoneal carcinomatosis. DONE

3 References and typesetting were corrected

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

Sincerely yours,  
Federico Coccolini MD