

Format for ANSWERING REVIEWERS



October 25, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 5233-review.doc).

Title: Comparative analysis of radiofrequency ablation and resection for resectable colorectal liver metastases

Author: Sanghwa Ko, Hongjae Jo, Seongpil Yun, Eunyong Park, Suk Kim, Hyung-Il Seo

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 5233

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

1 Format has been updated

2 The language certificate by professional English language editing company (American Journal Experts) has been provided

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

To Reviewer 1 (02562273)

Major Comments

(1) How was the selection of patients for each treatment modality? It seems that patients recting surgery may have poorer performance status or more comorbidities (data that is not reported)

Answer: The authors greatly thank you for your suggestion. All patients were given the information and chose one of treatment modality. At that time, surgical resection was not strongly recommended even though metastatic lesion would be operable.

(2) The follow up is not reported

Answer: The authors greatly thank you for your suggestion. The follow up is reported in new tables.

(3) A multivariate analysis does not make sense in a small series like this.

Answer: The authors greatly thank you for your suggestion. The sentences of 'Multivariate analysis' are all deleted. There was no significance so that the conclusion would not be changed.

Minor comments

(1) Clinipathological data subsection (page 9): The text says that the tumor diameter in the RFA group was larger than in the resection group when it was the opposite.

Answer: The authors greatly thank you for your suggestions. We have changed the word 'larger' to 'smaller'.

To Reviewer 2 (00054683)

Major Comments

(1) Statistical comparisons between two groups, one formed by 17 patients and the other by 12, is quite unrealistic especially for what regards Cox regression (multivariate analysis). Probably, a more cautious approach should be recommended, reporting results as a case-series, still reporting survival rates for the two treatments but removing regression analysis. A Table with clinical, pathological and outcome data of

each of the 29 patients is recommended.

Answer: The authors greatly thank you for your suggestion and totally agree with your opinion. New two tables about clinical, pathologic and outcome data were added

- (2) Table 2 should report percentages.

Answer: The authors greatly thank you for your suggestion. We have corrected the table. (New Table 4)

- (3) In the discussion section Authors stated that “Reuter et al. reported superior DFS rates in patients with resectable CRLM following surgical resection than that following RFA[9] “ but their refer to a work regarding hepatocellular carcinoma.

Answer: The authors greatly thank you for your suggestions. We totally reviewed all references and had made revision.

To Reviewer 3 (02542049)

Major Comments

- (1) While the data analysis is carried out with care, there is lack of citation of recent literature.

Answer: The authors greatly thank you for your suggestion. We thought that there had been no definite paradigm shift in this topic, so cited literature including old-fashioned and recent ones.

- (2) The authors also should address the molecular factors that could have played in the positive outcome. i.e., why patients respond better for RFA with resectable tumors.

Answer: The authors greatly thank you for your suggestion. But we thought this is the main secret of our result that we had not found.

- (3) Format the manuscript according to the Journal requirements

Answer: Format has been updated

4 “COMMENTS” writing requirements have been provided (background, research frontiers, innovations and breakthroughs, applications, terminology and peer review).

5 References and typesetting were corrected

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

Sincerely yours,



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