

Dear Editor,

Title: **“Lifestyle factors and long-term survival of gastric cancer patients: a large bidirectional cohort study from China”**. Thank you very much for sending us the reviewers’ and editors’ comments. Response to the issue that the reviewers raised is provided below.

### **Reviewer 1 report**

This is a well designed and written manuscript. Limitation and future perspective should be more extensively discussed.

✓ Thanks for your kind advice.

Done as suggested, we revised the manuscript by giving more extensively discussed of limitation and future perspective in the discussion.

### **Reviewer 2 report**

1-“no surgery, gastrectomy, and only curative gastrectomy patients”: Should be explained as more detail.

✓ Thanks for your kind advice.

Done as suggested, we defined specificity these four groups in METHODS of our revised manuscript.

2-Surgery treatment with D2 lymphadenectomy is cornerstone in potential curable T2-T4 or N+ patients with gastric cancer. Surgery treatment without D2 lymphadenectomy is accepted as only palliative treatment. Therefore; a: Total and subtotal gastrectomy subgroups should be added b: Subgroups including gastrectomy with D2 lymphadenectomy and gastrectomy without D2 lymphadenectomy should be added.

✓ Thanks for your kind advice.

Done as suggested, we showed the detailed groups in our revised manuscript. Gastrectomy was defined as surgery with or without D2 lymphadenectomy, while curative gastrectomy group was defined as patients received surgery with D2 lymphadenectomy and had negative margins. We highly think these four groups -total patients, no surgery, gastrectomy, and curative gastrectomy- were enough for discussing this question.

3-Which edition was used for TNM staging?

✓ Thanks for your kind advice.

We used the AJCC 8th TNM stage.

Done as suggested, we add the detailed information in METHODS of our revised manuscript.

4-This study does not provide sufficient contribution for research progress in this field in the conclusion section although it includes a large number of

patients.

✓ Thanks for your kind advice.

We didn't find much positive results, however, our results contribute to a better understanding of the role of lifestyles on the overall burden of gastric cancer with long-term prognosis. Among the total patients, weight loss (both 0 to 10% and > 10% groups) but not BMI at diagnosis was related to survival results. For other factors, smoking history of more than 30 years conferred a worse prognosis for only gastrectomy patients. These outcomes were meaningful based on a 20-year database in China.

Once again, thank you very much for your time! Please let me know if you need any additional information.

Yours,

Lulu Zhao.