

Reviewer1

Very well written manuscript of drug-eluting beads transarterial chemoembolization sequentially combined with RFA in the treatment of untreated and recurrent HCC. The results are very interesting, and well discussed. Data in tables, and the figures are well. A minor editing is required.

Reply: Dear reviewer, thanks for your comments. We have revised the manuscript according to your suggestion.

Reviewer2

Due to the limitation of local tumor control range, RFA is difficult to completely cover tumors with a diameter of more than 3 cm. The combined use of TACE and RFA is one of the strategies to obtain a larger ablation coverage volume. The microsphere can adhere to the blood vessel to achieve complete embolization, and avoid aggregation at the proximal or distal end of the blood vessel. The post-treatment efficacy and safety are better than traditional TACE combined with RFA. However, due to the high cost of drug-loaded microspheres, there are limited reports of DEB-TACE combined with RFA in patients with primary HCC. I read this study with great interest. In this study, the authors explored the possible benefits of DEB-TACE sequentially combined with ultrasound-guided RFA by analyzing the liver function and clinical efficacy of patients with untreated and recurrent HCC. The inclusion criteria and exclusion criteria of primary HCC is reasonable, and very clear. Examinations are well performed. Results are interesting and well discussed. Only the discussion is somewhat long, please make a minor revision.

Reply: Dear reviewer, thanks for your comments. We have revised the manuscript according to your suggestion.

Reviewer3

This study is very interesting. I recommend to accept it for publication after a minor editing. Thank you very much.

Reply: Dear reviewer, thanks for your support. We have revised the manuscript with red fonts.