

Lian-Sheng Ma,
Editor-in-Chief
World Journal of Clinical Cases

09 October 2020

Dear Dr Ma,

Re: Manuscript reference No. 59227

Please find attached a revised version of our manuscript "Risk factors for de novo hepatitis B during solid cancer treatment", which we would like to resubmit for publication as a Retrospective Study in the *World Journal of Clinical Cases*.

Your comments and those of the reviewers were highly insightful and enabled us to greatly improve the quality of our manuscript. In the following pages are our point-by-point responses to each of the comments of the reviewers as well as your own comments.

Revisions in the text are shown using yellow highlight for additions and strikethrough font for deletions. In accordance with Reviewer 1's suggestion, we have added the following: "However, none of the patients with liver cancer in whom HBVDNA was detected had previously been diagnosed with or treated for hepatitis B." (page17,line 7)

We hope that the revisions in the manuscript and our accompanying responses will be sufficient to make our manuscript suitable for publication in the *World Journal of Clinical Cases*.

We look forward to hearing from you at your earliest convenience.

Yours sincerely,

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Responses to the comments of Reviewer #1

1, Was this because the patients were on medication for Hepatitis B ?

Response: None of the study participants were receiving medication for hepatitis B.

2. It is expected that HBV DNA can be detected in patients with Hep B core total positive who developed HCC as this can be OBI. Did the authors check about HBV DNA detection past for patients with Hepatoma ?

Response:

As stated in the discussion, the high rate of reactivation during HCC treatment is possibly attributable to some patients being inactive carriers of hepatitis B. We were unable to determine previous HBVDNA status in our patients with hepatoma. However, none of the patients with liver cancer in whom HBVDNA was detected had previously been diagnosed with or treated for hepatitis B.

It's also interesting to note that patients with cancers originating in organs involved in digestion and absorption, such as the tongue, pharynx, esophagus, stomach, hepatobiliary pancreas, and colon, showed significantly higher reactivation rates than those whose cancers originated in other organs, such as the lung, thyroid, urinary gland, gynecological organs, and breast. Hepatitis B virus is not known to be a causative factor for these cancers.