Response to reviewer 1:
Question 1: The number of studies could be increased to add them in the information, they mention only 9 studies, if more studies are available they could be added, however the number of patients included is so good.
Answer 1: Actually, only nine studies explored the association of YKL-40 with prognosis of colorectal carcinoma patients up to now. To be honest, this is one of the limitations of this study and we have explained this in the discussion part.

Question 2: In the introduction in the line 15 it would be important to add in which types of cancer YKL-40 is overexpressed.
Answer 2: We have indicated this in the line 15. "such as the glioblastoma, melanoma, small cell lung cancer and colorectal carcinoma".

Question 3: In the line 17 and 18 it should be added in which types of cancer the expression of YKL-40 has been detected by immunohistochemistry.
Answer 3: We have pointed out the type of cancer "glioblastoma".

Question 4: In line 19 it would be important to add what types of cancer serum YKL-40 levels have been evaluated.
Answer 4: We have added the types of cancers "breast cancer, melanoma, ovarian cancer and renal cell cancer".

Question 5: In line 22 what do they refer to with inconsistent results?
Answer 5: This sentence means that some studies reported positive results and some studies reported nonsignificant association of YKL-40 with prognosis of colorectal carcinoma patients.

Question 6: In the Inclusion and exclusion criteria, how they divided their group of patients in relation to normal and elevated levels of YKL-40 in serum or plasma, specify if they used average, median or percentiles, specify the value.
Answer 6: In the table 1, we have specified the source of the critical values of YKL-40.

Response to reviewer 2: None.

Response to editor:
Abbreviations: actually, the word "YKL-40" does not have a full name.

Response to science editor:
Question 1: The number of cases in this paper is small, and although publication bias has no significant effect, I am full of concern about it.
Answer 1: To be honest, this is one of the limitations of this study and we have pointed out in the discussion part.

Question 2: Other basic case information of patients should be included in basic characteristics of included studies, such as tumor indicators, gender, age, etc.

Answer 2: We have added the information about gender, age and number of color or rectal carcinoma patients in the table 1.