

ANSWERING REVIEWERS



Feb 17, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 7533-revised_2.doc).

Title: Conventional endoscopic features are not sufficient to differentiate small, early colorectal cancer

Author: Wan Park, Bun Kim, Soo Jung Park, Jae Hee Cheon, Tae Il Kim, Won Ho Kim and Sung Pil Hong

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 5365

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

1 Format has been updated

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

(1) I find your tables confusing especially table 2. You have added the benign polyps to the superficial SM cancers; I don't think this adds any value. In addition, I would like to see a table comparing deep versus superficial SM cancers.

-> Thank you for your comments. We found that we mentioned the Table 1 in the wrong paragraph. We corrected the mistake. We added paragraph of "SM cancers vs. adenomas" in results as a description of Table 1 and maintained the paragraph of "Deep SM cancers vs. superficial SM cancers". Table 2 and Table 3 composed in the same comparison group (Deep submucosal cancers vs. superficial tumors). Therefore, the Table 2 was maintained to describe the comparison of baseline characteristics between two groups.

(2) The authors conclude that invasive morphology, invasive pit patterns, and non-lifting signs are not sufficient to differentiate small, early colorectal cancer based on their diagnostic accuracy. However negative predictive value for SM deep cancers of each factors are over 95%. NPVs for SM deep cancers > 95% are high and these should be considered as quite valuable for determination of treatment strategy (indication for endoscopic treatment or not). The conclusion of this article is misleading.

-> Thank you for your kind comments. We also agree with the reviewer's opinion. The high NPVs are also useful for determination of treatment strategy. Therefore, we added that point to the discussion section. Nevertheless, the diagnostic accuracy for the deep SM cancer was not sufficient, so that the 68% patients with deep SM cancers were initially under-treated.

(3) The authors should clarify how non-lifting sign were evaluated for these lesions. In addition, what kind of liquid was injected to the submucosal layer for assessing non-lifting sign.

-> According to the reviewer's comments, we added description about the liquid type which was injected to the submucosal layer and checked the method to assessing the non-lifting sign.

(4) Please provide the decomposable figure of Figures, whose parts are movable and can be edited. So please put the original picture as word or ppt or excel format so that I can edit them easily

-> According to the editor's comments, we provide the decomposable figure of Figures as ppt format.

3 References and typesetting were corrected

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

Sincerely yours,

Sung Pil Hong, MD, PhD



Department of Internal Medicine

Yonsei University College of Medicine

50 Yonsei-ro, Seodaemun-gu, 120-752, Seoul, Korea

Tel.: +82-2-2228-1990

Fax: +82-2-393-6884

sphong@yuhs.ac