

ANSWERING REVIEWERS



February 28, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 7737-review.doc).

Title: Screening for and surveillance of Gastric cancer

Author: Debora Compare, Gerardo Nardone

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 7737

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

Reviewer 1

We thank the reviewer for her/his useful comments.

The article is a summary of what exists in the literature on this subject without bringing new element that can improve the screening of stomach cancer.

The aim of review is generally a summary of existing literature trying to draw simple and easy recommendations useful in the clinical management. New findings not supported by strong evidence (randomized controlled studies including a large number of subjects) should not be reported.

Risk factors should be more defined as different genetic susceptibilities that may cause gastric cancer.

In the new version of the manuscript risk factors and genetic susceptibility have been widely addressed (see paragraph "The condition")

This recent reference could be added : Helicobacter pylori CagA and VacA genotypes and gastric phenotype: a meta-analysis. Matos JI, de Sousa HA, Marcos-Pinto R, Dinis-Ribeiro M. Eur J Gastroenterol Hepatol. 2013 Dec;25(12):1431-41.

This article has been quoted in the paper (see reference 15)

Reviewer 2

We thank the reviewer for her/his useful comments.

Generally, only 3-5% of H. pylori infected individuals develop gastric cancer, which indicates that other factors are involved. Thus, the authors should include these findings.

The factors involved in the pathogenesis of gastric cancer have been addressed (see paragraph "The condition")

In page 5, concerning genetic susceptibility, SNP data should be shortly discussed.

In this new version, genetic susceptibility, focusing on SNP, has been largely addressed (see paragraph "The condition")

In page 6, line 14, PGI must be pepsinogen I.

Done, now It reads pepsinogen (PG) I.

Cite the paper of Di Mario et al. and Bodger et al.

The article of Di Mario et al., (Dig Dis Sci 2006; 51: 1791-5) and Bodger et al. (Helicobacter 2001; 6: 216-23) have been reported in the new version of the paper (see reference 41 and 42)

Reviewer 3

We thank the reviewer for her/his useful comments.

...I believe that "the answers to who should be screened, when screening should be started and how screening should be performed, as well as the optimal diagnostic approach and the best timing to schedule a surveillance program" are not clearly given.

We agree with the reviewer but, based on the currently available data, we cannot draw conclusive statements on how screening should be performed, as well as the optimal diagnostic approach and the best timing to schedule a surveillance program. This is now addressed in the manuscript (see paragraph "The program")

In spite of a few older references being well cited, for most of the others there are more recent references that should be cited instead.

The new version of the paper held the references suggested by the reviewer (see references 13 and 15). In addition the issue H. pylori virulence and gastric cancer risk has been addressed (see page paragraph "The condition" and reference 13).

The specific effect of salt consumption as a risk factor or fruits and vegetables intake as a protective factor is disregarded, as well as the potential role of smoking....

Now these issue are well addressed in the text (see paragraph "The condition" and reference 23).

Much more could be said if individual susceptibility was taken into account, and the usefulness that this may have on identifying subjects at risk...

In this new version genetic susceptibility has been addressed (see paragraph "The condition" and references 28-30).

The description of the available diagnostic tests and treatments is poor.

We thank the reviewer for her/his comment, however these issue have been also addressed in the second part of the manuscript, that is "The surveillance", so expanding the description of these chapters would be redundant and bored for readers.

3 References and typesetting were corrected

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

A handwritten signature in black ink, appearing to read 'G. Nardone', written over a horizontal line.

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