

Authors' responds

We thank the reviewers and appreciate their valuable comments and suggestions. We have revised the manuscript according to their comments.

Reviewer #1: This manuscript “Prostate only radiotherapy using external beam radiotherapy: A clinician’s perspective” (Manuscript NO: 77500) proposed a detailed and comprehensive topic of current interest regarding radiotherapy in the prostate cancer management. I consider that this manuscript is publishable in the World Journal of Cases after some minor revision. I suggest to update NCCN reference to latest version (2022) and standardize format.

Response: Thank you for your comment. We have changed the reference of the NCCN guidelines from the 2021 version to the 2022 (latest) version.

Reviewer #2: Well written review article, it would be wonderful if you could add brachytherapy and SABR for prostate and their efficacy versus PORT for low risk and intermediate risk as it will complete your review.

Response: We would like to thank the reviewer for the comments provided. We intended to mention prostate only-targeted EBRT as the current title reads and have included prostate only-targeted SBRT for low- or intermediate-risk patients.

Reviewer #3: This paper focuses on the external beam technical advancements, radiation dose and the radiation volume, summarizes and describes the progress of radiotherapy for prostate cancer. It describes the background of prostate cancer radiotherapy in detail, including some basic concepts of radiotherapy, and puts forward some problems that have not been fully studied at present, such as the comparison of the efficacy of WPRT and PORT in locally advanced cancer. Meanwhile, it expresses the necessity of the theme of this article. References of this paper are abundant, and its points of view are overall. It describes the advantages of fractionated radiotherapy and three methods of external beam radiotherapy compared with traditional radiotherapy. Inside, the description of the advancement of radiotherapy technology is very detailed and comprehensive. It describes exhaustive from 2D CRT to 3D CRT, intensity modulated radiotherapy (IMRT), stereotactic radiotherapy (SBRT) and image-guided radiotherapy (IGRT). The author collates and summarizes the data in the references. In addition to highlighting the maturity and applicability of IMRT, SBRT and IGRT technologies, and propose the uncertain curative effect in some patients, such as high-risk patients and elderly patients. It provides ideas for further research. In conclusion, author makes a summary of the article and gives a partial answer to the problem of radiotherapy management. At the same time, it puts forward the research directions in the future, such as the optimal dose and fractionation of RT, the combination of androgen deprivation therapy by risk group, fractionated radiotherapy and so on, which provides a certain reference values for another researchers in the future. Problems and deficiencies

- ① The language of the paper is not easy to understand, in which more professional terms are adopted and the explanation is relatively simple. It is difficult for persons who know little about prostate cancer radiotherapy. They need to consult more materials to know what the author wants to express.

Response: Thank you for your comment. The paper had already undergone English language editing prior to submission. Nevertheless, we have resubmitted it for another round of editing for more accurate explanations and better readability. The editing certificate has been attached herewith.

- ② There are many aspects of description in the introduction, which are more confused. Introduction describes too much about WPRT and ENI, which make readers easily ignore the main aspects of the article.

Response: Thank you for your suggestions. We have accordingly revised the introduction (P1 L12-18) for enhanced clarity.