

Jerzy Tadeusz Chudek MD  
Editor-in-Chief

*World Journal of Clinical cases*

Dear Dr. Jerzy

Manuscript Number: **79639**

Classification of rectal cancer according to recurrence type: Comparison of Japanese guidelines and Western guidelines

Thank you for your kind e-mail dated Oct 23, 2022, regarding our manuscript. According to the reviewers' suggestions, the manuscript has been carefully revised, and the revisions are indicated in red throughout the manuscript. We hope that our revised paper has improved adequately and that it will appeal to the readers of your journal. We would be grateful if you could kindly reconsider this manuscript for publication in *World Journal of Clinical cases*

Yours sincerely,

Hiroshi Miyakita, MD, PhD,  
Department of Surgery, Tokai University, School of Medicine,  
143 Shimokasuya Isehara, Kanagawa, 259-1193, Japan.  
Tel: +81-463-93-1121  
E-mail: mykt0124@tokai-u.j

Answer to the reviewer:

Thank you for review our manuscript. We made modification.

Reviewer's comment

- 1) The objectives mentioned in the abstract are not consistent with the title and the rest of the article, although these objectives are well explained in the main text. The comparison with colon cancer must also be mentioned in the abstract as an objective of the study, as it is in the main text.
- 2) The right colon normally includes the cecum, the ascending colon, the hepatic flexure and the right transverse colon. The left colon normally includes the left transverse colon, the splenic flexure and the sigmoid. The junction between the right colon and the left colon is located opposite the middle colonic artery. The right colon and the left colon are two different anatomical entities, with different vascularization, different molecular biology and different long-term behavior. In your study, you considered left transverse colon as right colon, which may distort your result. So I think the comparison between these different segments, as you have defined it, invalid. But it remains so by comparing the rectum versus the colon.
- 3) There are a few typos to correct (repeated words)

Answer

- 1) Thank you for pointing out for abstract. I have revised the abstract to clarify the comparison with colon cancer. I corrected the text in red
- 2) As pointed out, the classification of RC and LC is unnatural, so we combined RC and LC and reclassified them as Colon cancer. Fortunately, there were no statistical changes because we were

originally comparing RC + LC and rectal cancer. Table was also changed to Colon cancer and corrected

- 3) For grammatical errors, the manuscript must be re-edited and submitted.