

Dr. Saleh A. Naser, PhD
Editor-in-Chief
World Journal of Gastroenterology

Re: Neoadjuvant Therapy for Pancreas Cancer: Past Lessons and Future Therapies

Authors: Jeffrey Sutton, MD and Daniel E. Abbott, MD

Manuscript NO 7970

Dear Professor Naser:

Thank you very much for your critical review of our submitted review article titled “Neoadjuvant Therapy for Pancreas Cancer: Past Lessons and Future Therapies”. We have addressed the reviewers’ comments throughout the manuscript and bolded the new text for identification. Here we provide a reply to individual comments as follows:

- 1) Within the “Molecular Markers of Interest” section (pg. 19-27), we have clarified and distinguished between genetic alterations versus alterations in protein product production. Specific genes and protein symbols have been edited in accordance with commonly accepted and published conventions. Additionally, a short subsection was added which briefly discusses the value of epigenetics and non-coding RNA in the diagnosis, prognosis, and treatment of pancreatic cancer. Promising molecular markers are now highlighted within the “Conclusions” section (p. 28).
- 2) On page 10, the acronym ACS-NSQIP was clarified and spelled out as “American College of Surgeons National Surgical Quality Improvement Program”.
- 3) On page 12, we have edited the sentence “...the median survival of those undergoing resection had not yet been reached, while...”. The original intent was to convey that more than half of the patients undergoing resection were still alive at the time the article was published, and therefore a true “median survival” at which 50% of the patients had died had not yet been reached. We agree that this wording was confusing, and have opted to present the data as “% 5-year survival” instead.
- 4) The references have been updated to each include publication year.
- 5) All typographical and grammatical errors have been corrected and eliminated to the best of our knowledge. The formatting and alignment of the Tables and Figures at the end of the manuscript have been corrected. We have also shortened the manuscript according to reviewer recommendations, while still maintaining the most critical aspects of the content.

Thank you once again for your critical review of our manuscript. Utilizing your recommendations, we believe we are submitting to you a stronger manuscript, and hope you find it worthy of reconsideration for publication in the *World Journal of Gastroenterology*. Please feel free to contact us should any questions or concerns arise.

Sincerely,

Daniel E. Abbott, MD
Assistant Professor of Surgery