

December 7, 2022

Dr. Jin-Lei Wang, MSc
Editor-in-Chief
Baishideng Publishing Group Inc

Re: World Journal of Clinical Oncology Manuscript NO: 80075 – Manuscript requires a revision

Dear Dr. Wang,

Thank you very much for your review of our manuscript, “Oncologic impact of colonic stents for obstructive left-sided colon cancer”. We wish to express our appreciation to the reviewers for providing important insights regarding our manuscript. The comments have helped us significantly improve the paper.

Here, we are sending our revised manuscript. All changes have been made in response to the reviewers’ suggestion. In the following sections, you will find our responses to the individual reviewer’s comments.

We are grateful for the time and energy you expended on our behalf.

Reviewer #1:

We appreciate the positive comments of the reviewer.

Reviewer #2:

#1: Reference No. 17 is an older paper. It should cite more recent one.

A1: We appreciate helpful suggestion of the reviewer. We have cited a more recent paper published in 2021 (No. 18) and added a description of it.

#2: For ColoRectal Obstruction Scoring System (CROSS), “Japan Colonic Stent Safe Procedure Research (JCSSPR) Group. CROSS: ColoRectal Obstruction Scoring System 2012. Available from: https://colon-stent.com/001_mainpage_en.html” should be cited, not reference No. 21.

A2: We agree with you and have cited the suggested literature instead of No. 21 before revision.

#3: Perforation 2nd paragraph Please mention that it should be noted that emergency surgery had better postoperative outcomes than BTS by stent because of the lower success rate of stent placement reported prior to 2014.

A3: We thank the reviewer for this suggestion. We have added the description in the last of the paragraph.

#4: Perforation last paragraph Regarding results of WallFlex stent, it should also be mentioned that in a prospective multicenter study using WallFlex stent in Japan, the perforation rate was 1.6%. (A prospective multicenter study on self-expandable metallic stents as a bridge to surgery for malignant colorectal obstruction in Japan: efficacy and safety in 312 patients. Surg Endosc (2016) 30:3976–3986.)

A4: We appreciate the reviewer's comment on this point. We have cited this paper and added the description in the middle of the paragraph.

#5: Migration and re-obstruction I am aware that laser or balloon dilation prior to stent placement is not recommended, but can you mention it?

A5: We agree that this point should be mentioned. We have newly cited two papers (No. 29 and No. 30) and added the description in the middle of this section.

#6: Safety of chemotherapy section: last paragraph the perforation rate in the bevacizumab group was only 1%, which was lower than that of the non-bevacizumab group (3%). Since there is no significant difference, I think author should describe that they were equivalent.

A6: As you mentioned, our description was inappropriate because there is no significant difference between them. We have revised the description.

Again, thank you for giving us the opportunity to improve our manuscript with your insightful comments. We believe that we have addressed the reviewers' comments and hope that the revised manuscript is now acceptable for publication. We appreciate your consideration.

Sincerely yours,

Hideyuki Suzuki

Department of Gastroenterological Surgery, Tohoku Medical and Pharmaceutical
University

1-15-1 Fukumuro, Miyagino-ku, Sendai, Miyagi 983-8356, Japan

hideji@surg.med.tohoku.ac.jp