

Format for ANSWERING REVIEWERS



May 31, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 3066-edited.doc).

Title: Risk factors for local recurrence following neoadjuvant chemoradiotherapy for rectal cancers

Author: Jia-Yuan Peng, Zhong-Nan Li, Yu Wang

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 3066

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:

The paper is very good and complex. The authors thoroughly explained the problem of distinctive risk factors for local recurrence following neoadjuvant chemoradiotherapy for locally progressive rectal cancers They have described, in detail, the research results, as well as, the discussion. The conclusion was a logical consequence of the research results.

Response: thank you very much for your favorable evaluation.

Reviewer 2:

This is a literature review. I just suggest to put , "a literature review" in the end of the title. Then the manuscript is very informative

Response: thank you for your advice. But regretfully, we must follow the requirements of the journal on the words limitation of the Title (less than 12 words) so we have to make the title more concise. Anyway, we still appreciate your constructive comments.

Reviewer 3:

The issue is interesting and defining risks of local recurrence would be extremely helpful in treatment guidance of neoadjuvant treatment especially with respect to radiotherapy. Radiotherapy treatment volumes have evolved from scientific experience about location of relapses after resection and are influenced by risk factors attributable to the biologic condition of the tumors. The main risk factors related to a) tumor conditions (e.g. stage, grading, location, lymph vessel invasion, etc.), and b) treatment related factors (i.e. extent of surgery, surgical technique, use of robotic or minimally invasive surgery) should be analyzed more strictly. **The manuscript would be greatly improved if the authors could give a contemporary look to the problems of rectal cancer surgery from the surgeon's point of view.**

Response: thank your advice. As required, we have made a contemporary look to the problems of rectal cancer surgery, mainly of the anterior resection (AR) and abdominoperineal resection (APR). moreover, we analyzed the potential risk for LR. We specified the problems in a new Section (Section 7). We hope it will improve our manuscript.

Minor points: a) language revision is needed.

Response: we have sent our manuscript to a language-editing company for English polishing.

b) The Reference section is not in full accordance with the journal's recommendations. Citations are given twice (e.g. Ref. 24 and 31.)

Response: we have updated the format of Reference according to the journal's requirements. In addition, the replicate Refs has been deleted.

Reviwer 4:

This is a review article. From the contents, this is not a meta-analysis, but a systematic review article. To give the distinctive risk factors suggested in this article clinical significant evidence, it is essential to retrieve them from well organized articles. **Therefore, it is necessary to show characteristics of data analyzed, such as methods of data search, keywords, eligibility criteria of patients, language of papers, etc. Accordingly, "methods and materials" section is needed to make this manuscript more valuable and reliable.**

Response: thank you for your constructive comments. We have added a section of "Material and Methods" in which we specified the key words of article search, the process of data collection, the criteria of inclusion and exclusion and paper selection. We hope it could make our review more reliable.

Introduction

1) 4th line : Multidisciplinary approaches... - To insert 'neoadjuvant' seems to be better to understand the context.

Response: we have made the correction

2) 6th line : ...its pattern changing. - As nCRT altered patterns of local failure, would you show them more specifically?

Response: we have specified the content.

3) 9th line : ...in addition to... - From 'these distinctive risk factors' in the following sentence, the associated risk factors with operation and adjuvant CRT are considered to be different to those with nCRT. So, it looks like to be appropriate to use 'unlike' or 'contrary' instead of 'in addition to'.

Response: we think your comment is very important and we have made the correction.

4) 10th line : these distinctive risk factors... - Would you mention them concretely? It is intriguing what the basis of their selection is. Before the distinctive risk factors were discussed, it is necessary to show why they were chosen in the “methods and materials” section.

Response: we have explained why we selected “these distinctive risk factors” in “Material and Methods” (see “Traditional risk factors such as differentiation, vascular invasion, TNM staging and circumferential resection margin status were excluded. Risk factors related with the downsized effect by nCRT were included”)

3 References and typesetting were corrected by Jing-Yun Ma Editorial Office

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

Sincerely yours,

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