

Dear Sir/Madam,

Sincerest thanks for your comments and suggestions.

We have carefully evaluated the reviewers' critical comments and thoughtful suggestions, and revised the manuscript accordingly. The amendments are in red so that they may be easily identified. Point by point responses to the reviewers' comments are listed at following:

Reviewer 1:

Comments: Authors did excellent work.

Answer: We thank the reviewer for his or her appreciation.

Reviewer 2:

Comments: The authors have investigated the association between CYP24A1 polymorphisms and colon cancer, polyps and UC. They found some significant correlations on direct comparisons. The study is well conducted and expertly written. My only comment is that the clinical relevance of these associations as it pertains to the daily management of these patients is unclear. While there is a predictive value, how is this information going to benefit patients going forward? One paragraph in the discussion discussing this would be useful.

Answer: We thank the reviewer for this constructive suggestion. Our findings supported the associations between SNPs on CYP24A1 and the risk of colonic polyps and colon cancer, and predicted a potential role of CYP24A1 polymorphisms as biomarkers for population-screening of CRC. In China, a two-step screening method has been used. Immunochemical FOBT and a questionnaire of high-risk factors are used in the first step. If the FOBT is positive or the questionnaire reports high-risk factors, a colonoscopy is suggested as the second step. The addition of SNPs tests as primary screening may further decrease the number of high-risk subjects entering the second step and undergoing colonoscopy, thus reducing the medical cost and the complications of colonoscopy. However, the sensitivity and specificity of SNPs tests deserve further investigation before it is applied in clinical practice. We added these in the discussion and thank the reviewer for the suggestion again.

With best wishes,

Yours sincerely,

Jing-Nan Li