

Professor Xue-Jiao Wang  
Editor-in-Chief  
World Journal of Gastroenterology  
**Re:** No.: 41444  
October 24, 2018

Dear Professor Xue-Jiao Wang,

We greatly appreciate your and reviewers' time and positive review about our manuscript titled "**Role of Fibrinogen and D-dimer-Fibrinogen Ratio in Resectable Gastrointestinal Stromal Tumors**". The reviewer's comments are very helpful in improving our manuscript. Now we have carefully studied the reviewers' comments and have appropriately addressed their concerns.

We have undertaken the work required by you and the reviewers to address the critiques of the reviewers, and hope that the manuscript will now be found acceptable for publication.

In the revision of our manuscript, we respond to the requests from both you and the reviewer point-by-point. For clarity, we present those requests in *italics* followed by our responses.

Sincerely yours,

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## **Reviewer #1 (Reviewer's Comments to the Author)**

### **Response to Reviewer #1**

*This is an interesting study, but with the limitations that it can't be applied in clinical.*

**Answer:** Thank you very much for your careful reading of this article. Although this study is a retrospective study, the findings of this study may provide a reference for predicting the prognosis of GIST in the future.

### **Specific comments:**

*The authors at the end of the conclusion seems that are not very clear the limitations of the study in comparison with the normal parameters used in GIST.*

**Answer:** Many thanks for your positive review and constructive suggestions for improving our manuscript.

At present, the prognostic factors of GIST, such as mitotic count, tumor location, size, rupture, metastasis, all depend on postoperative pathology results. In this study, FIB, DFR and other hematological indexes can predict the prognosis of patients with the GIST before operation. Therefore, early intervention therapy can be given to improve the prognosis of patients with GIST. Especially for patients who can't be treated surgically. Please see the penultimate paragraphs 4 and 5 of the "DISCUSSION" section of the article.

## **Reviewer #2 (Reviewer's Comments to the Author)**

### **Response to Reviewer #2**

*A large retrospective study confirming the rise factors for worse prognosis of GIST. good hypotheses and a large number of patients to prove the concept.*

**Answer:** Thanks for your suggestions. In this retrospective study, 170 patients with GIST were collected, and the risk factors affecting the prognosis of GIST were obtained, which indicated the direction of large scale research in the future.

### **Specific comments:**

*English needs some polishing.*

**Answer:** We thank the editor and reviewers for the positive and constructive suggestions, which helped us to significantly improve our manuscript. The revised manuscript has been polished by a native English speaker (from American Journal Experts) with a scientific background, as well as carefully edited for content by our senior authors.

The "Editorial Certificate" is followed:

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## Nature Research Editing Service Certification

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This is to certify that the manuscript titled Role of Fibrinogen and D-dimer–Fibrinogen Ratio in Resectable Gastrointestinal Stromal Tumors was edited for English language usage, grammar, spelling and punctuation by one or more native English-speaking editors at Nature Research Editing Service. The editors focused on correcting improper language and rephrasing awkward sentences, using their scientific training to point out passages that were confusing or vague. Every effort has been made to ensure that neither the research content nor the authors' intentions were altered in any way during the editing process.

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**Manuscript title:** Role of Fibrinogen and D-dimer–Fibrinogen Ratio in Resectable Gastrointestinal Stromal Tumors

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### **Reviewer #3 (Reviewer's Comments to the Author)**

#### **Response to Reviewer #3**

*Is there any difference between conventional risk factor (tumor size and mitosis) and risk factors in this manuscript. I think it is needed to compare these new risk factors with conventional risk factors.*

**Answer:** We appreciate the reviewer's comments and suggestions. The traditional risk factors (tumor size and mitosis) were obtained from pathological tissues after GIST, while the risk factors (FIB, DFR) in this study were pre-operative hematological tests to predict the prognosis of GIST. These indexes can be combined to predict the prognosis of GIST better.

#### **Specific comments:**

*The risk factors in this manuscripts are FIB, D- dimer, DFR, PLT. I think that it is better to rank or score these risk factors according to importance of predicting the prognosis of GIST.*

**Answer:** Thanks for your careful review. In this study, univariate analysis showed that FIB, D-dimer, DFR, PLT was associated with the prognosis of GIST, but in multivariate analysis, only FIB and DFR were independent risk factors for the prognosis of GIST. These results are reflected in the "RESULTS" "DISCUSSION" section.