

Format for ANSWERING REVIEWERS

November 4, 2013

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: 5646-edited.doc).

Title: Hepatocellular carcinoma and synchronous liver metastases from colorectal cancer in cirrhosis: a case report

Author: Marcello Maida, Fabio Salvatore Macaluso, Massimo Galia, Giuseppe Cabibbo.

Name of Journal: *World Journal of Hepatology*

ESPS Manuscript NO: 5646

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 reviewers:

- (1) What are the important points for the management of colon cancer in cirrhotic patients with liver nodules. Do we need to perform liver biopsies for all liver lesions before ablative therapy or surgery for colon cancer with suspicion of liver metastasis? What is the risk of tumor seeding for percutaneous liver biopsy in this context? How does the histologic information of liver lesions change the management in this patient?

Answer: Data regarding the risks of tumour seeding have been added, including a specific reference. In addition, a sentence regarding the impact of histology on management of these patients has been added. Unfortunately, on the basis of this single experience, an absolute indication about the number of biopsies that must be performed and which lesions should be biopsied cannot be provided. Of course, as emphasized throughout the text, it is reasonable to obtain at least one biopsy of each type of lesion when the presence of metastases in a cirrhotic liver is suspected.

- (2) 1: Why did the ascites increase after surgery and RFA in spite of good liver function? The author does not mention the cause. The author should describe possible causes of it. 2: The authors should add detailed clinical course after the surgical treatment: subsequent course of ascites-treatment, and cause of death (cause of progressive liver failure). 2: Fig. 3 in page 8; "a luminal narrowing with marked segmental circumferential thickening of the hepatic flexure of the colon", these findings are hard to recognize from only Fig3. More descriptive pictures should be listed. 3: Line 12-13 in page 3, "Liver is the most frequent metastatic site for patients with CRC; metastatic nodules are present in more than 50% of cases at presentation.", is "that" wrong of "than" in this sentence? And cite references should be listed here. 4: Line 27 in page 5, "CRHP" should be corrected as "CRMP".

Answers: A possible reason for the onset of ascites, i.e. surgical treatment itself, has been provided. Details on clinical course after surgical treatment, subsequent

ascites treatment, and cause of death have been included. Typos on Line 12-13 in page 3 have been corrected, and a reference regarding the incidence of liver metastasis from colorectal cancer has been included. "CRHP" has been corrected as "CRMP" on Line 27, page 5. Unfortunately, there are no images able to better illustrate the colorectal cancer among the available CT scan slide set .

3) References and typesetting were corrected

Sincerely yours,

Giuseppe Cabibbo MD, PhD,

Section of Gastroenterology, DIBIMIS,

P.zza delle Cliniche 2, Palermo, Italy.

Mail to: g.cab@libero.it;

Telephone: +39-091-6552274

Fax: +39-091-6552156