

## Format for ANSWERING REVIEWERS



January 6, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 6670-edited-revised version.doc).

**Title:**

**Follow-up after gastrectomy for cancer: results of an international web round table**

**Authors:**

**Gian Luca Baiocchi, Yasuhiro Kodera, Daniele Marrelli, Fabio Pacelli, Paolo Morgagni, Franco Roviello, Giovanni De Manzoni**

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 6670

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

### **Reviewer1**

*Comment:* This topic is interesting and controversial.

*Answer:* Many thanks. Indeed, a number of paper are appearing having as object the topic of follow-up (for instance, a recent number of the Journal of Clinical Oncology was devoted to follow-up in colon cancer, and the GIRCG and the IGCA have launched a CHARTER SCALIGERO on GASTRIC CANCER, which is a scientific initiative based on 15 articles: article 13 focused on the follow-up after gastrectomy. The CHARTER SCALIGERO will be displayed in several Institutional settings including the European Parliament and the WHO.

*Comment:* 1. According to the NCCN Clinical Practice Guidelines in Oncology, the follow up program after radical gastrectomy include: every 3-6 mo for 1-3 y, every 6 mo for 3-5 y, then annually; CBC and chemistry profile as indicated or endoscopy, as clinically indicated Monitor for vitamin B deficiency in surgically resected patients and treat as indicated. These proposals were recommended by most experts.

*Answer:* the Reviewer is absolutely right. As You can see in the list of collaborators, several surgeons from USA participated in the web round table which is depicted in our paper, and some of them did participated to the extension of the NCCN Guidelines too. However, the cited guidelines, as well as other guidelines that were deeply analyzed in preparation to the web round table, do not address many of the questions reported in table 1, which are the main aim of our paper.

*Comment:* 2.Though these current reports did not reveal a clear survival advantage for chemotherapy, most surgeons considered that combination chemotherapy resulted in better quality of life and overall survival for patients with advanced gastric cancer and recurrence.

*Answer:* this is exactly the final and take-home message we would like to give with our paper, and the Reviewer clearly accomplished that message

*Comment:* Further language polishing is needed.

*Answer:* this was actually done

## **Reviewer2**

*Comment:* This paper can be published in this state.

*Answer:* Many thanks.

3 References and typesetting were corrected

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

Sincerely yours,

A handwritten signature in blue ink, appearing to be 'S. J. ...', is located in the bottom right corner of the page.