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Dear Editor,

Thank you for your letter of “**World Journal of Gastroenterology Manuscript NO: 72984 – Notification on manuscript revision**”. We thank all the reviewers for their quite helpful comments and suggestions. We have revised the manuscript according to the reviewers’ comments. Below please find our point-by-point responses to the reviewers’ comments. Thank you for your valuable time and efforts on handling our manuscript. We hope that the revised manuscript can fully address the concerns from the reviewers and the manuscript can be accepted for publication.

A revised manuscript with the correction sections **red marked** was attached as the supplemental material for easy checking purpose.

Here below is our description on revision according to the reviewers’ comments.

Sincerely yours,

Xinlin Wu

Responses to reviewers' comments and a list of changes we have made

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: this work is interesting and it discusses a hot topic, but i have some comments:

1- the first sentence in the abstract, is it true that colorectal cancer is the most common cancer.

Response: Thanks for the reviewer's helpful suggestion. These sentence is revised in the manuscript.

2- the methods section is long, try to shorten it.

Response: Thanks for the reviewer's helpful suggestion. The methods section is corrected according to your suggestion.

3- Why is the certificate of clinical trial registration unapplicable?

Response: Thanks for the reviewer's helpful suggestion. Because in this study, we are mainly based on the basic research, including tissue microarray, immunohistochemical phase-assisted study. Human gene pression chip are derived from human colon cancer tissues, the experimental design and program of the study fully considered the principles of safety and fairness. Therefore, the recruitment of subjects is not involve the clinical trial. So, we considered the certificate of clinical trial registration is unapplicable. While the tissue for immunohistochemical analysis is from the patient's cancerous and non-cancerous. Therefore, certificate of clinical trial registration were performed for these parts.

4- Regarding the figures, please add annotations, type of stain or dye, magnifications, program that generated the figure

Response: Thanks for the reviewer's helpful suggestion. The Figure caption is revised according to the reviewer suggestions. Because the cells infected with the virus usually carry green or red fluorescence, and can read and snap cells illuminate by the Celigo instrument. Therefore, partly figure captions not need provide the type of stain or dye. The magnifications also provide in the figure captions.

5- why there is no strobe guidelines for the use of animals in your work

Response: Thanks for the reviewer's helpful suggestion. Here, the animal is to be killed, it must be killed humanely, by a appropriate means as soon as the training procedure ends. The guidelines for the use of animals is added in the revised manuscript.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: This manuscript which describes the prognostic significance of centromere protein K (CENPK) in colorectal cancer carries significant importance if presented better.

1. Please check abbreviations in the abstract and whole manuscript.

Response: Thanks for the reviewer's helpful suggestion. The abbreviations is added and revised in the abstract and whole manuscript.

2. Phrases and sentences construction.

Response: Thanks for the reviewer's helpful suggestion. The phrases and sentence contruction is corrected according to the reviewer's recommendations .

3. The pathological criteria for patients` selection.

Response: Thanks for the reviewer's helpful suggestion. The manuscript were involved the tissue of patients and used for the tissue chip analysis. The pathological criteria for patients` selection as follow:

1. Colorectal cancer was diagnosed for the first time: colorectal cancer was confirmed by electronic fiberoptic enteroscopy and pathological examination;
2. The patient did not undergo chemoradiotherapy before surgery;
3. According to the 8th edition of the International Union against Cancer (UICC), or the postoperative pathological stage was stage II, and there were the following high risk factors: ①poor histological differentiation (grade III or IV) and normal mismatch repair (pM-MR) or microsatellite stabilization (MSS), ②T4, ③vascular lymphatic invasion, ④ nerve invasion;
4. Postoperative pathological stage III.

4. Material and methods lack information about the experimental animal used in the in-vivo part of the study.

Response: Thanks for the reviewer's helpful suggestion. The information of experimental animal used in the in-vivo part of the study is added in the revised manuscript.

5. Graphical abstract could help to highlight the findings.

Response: Thanks for the reviewer's helpful suggestion. The graphical abstract is added in the revised manuscript submitted system.

6. Reference for the method of cell line generation.

Response: Thanks for the reviewer's helpful suggestion. The references is added in the revised manuscript. The research based on the previous studies, which, as the basis for the selected cell lines. Please see as follow:

1. Wu XL , Yang ZW , HeL , et al. RRS1 silencing suppresses colorectal cancer cell proliferation and tumorigenesis by inhibiting G2/M progression and angiogenesis. *Oncotarget*. 2017; 8(47): 82968-82980.

7. Non uniform description of CENPK silencing.

Response: Thanks for the reviewer's helpful suggestion. The CENPK silencing description is corrected in the revised manuscript.

8. Graphs needed to be larger and clearer.

Response: Thanks for the reviewer's helpful suggestion. The Figure is revised according to the reviewer suggestions.

5 ABBREVIATIONS

Response: These parts is revised including Title, Running title, Abstract, Key Words, Core Tip, Main Text, Figures and Tables.

6 EDITORIAL OFFICE'S COMMENTS

(1) Science editor:

This is an interesting study. But the annotation of the figures in the manuscript is not detailed, please add relevant content.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade B (Very good)

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Response: Thanks for your helpful suggestion. The Figure and Table is revised. While the Figures is also merged by decomposable Figures, and organize them into a single PowerPoint file.