

February 7, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 8524-edited.doc).

Title: Improving the outcomes in gastric cancer surgery

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Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 8524

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revisions have been made according to the suggestions of the reviewers

(1) (reviewer no. 02441174) *"Despite minor flaws, I have read the manuscript with great interest. The manuscript is very up-to-date and innovative. It deals with current issues which every surgeon encounters in his daily work. As in every review, this work lacks the method of data searching which should take into account the main sources and period of time. The title reflects the main theme. The abstract is clear for the reader. Abbreviation ICU in paragraph "2. Advances in preoperative care" should be explained. The references are appropriate, relevant, and updated. The included tables are clear."*

We thank reviewer 1 for these comments. The missing details of how the literature was searched was added as suggested and the abbreviation mentioned is now written in full.

(2) (reviewer no. 02441722) *"This manuscript was very interesting and well written. However, I feel there are some problems in this article. Authors indicate several themes about surgery for gastric cancer. Each theme is very interesting. In Questionnaires of Nutritional statues, "A SNAQ ≥ 1 was associated with increased several complications ." is not understand. Authors indicate "SNAQ 1=no intervention" in Table 1. The state of "SNAQ=0" is not indicated in Table 1. Author should clear this point. In Surgical risk assessment, "comorbidity" should be changed to "comorbidity"."*

We are pleased that reviewer 2 found the themes described in our paper very interesting. Table 1 explaining the SNAQ score is derived from the quality hospital guidelines by the Dutch Ministry of Health that suggest whether intervention is necessary when admitted patients are screened for malnutrition. These recommendations are independent from our study results in gastric cancer patients that show that surgical risk increases when the SNAQ score is 1 or higher. We have now better explained this in the concerning paragraph and Table 1.

(3) (reviewer no. 00070288) *"This review provides an overview of methods implemented in pre-, intra- and postoperative stage of gastric cancer surgery to improve outcome. Authors provided enough evidence for proving this point and I believe that this review is worth for publishing. But I suggest that the discussion needs to be revise."*

3 References and typesetting were corrected

4 Language polishing was done, typo's and syntax errors were corrected. We wish to supply a language certificate by a professional English language editing company. Therefore we requested an extension of our revision deadline. But we received an out of office reply until 7 February. In fear of missing our deadline set at Friday 7 February we already submitted our revised manuscript.

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

Sincerely yours,

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