

Point-to-point response letter

Reviewer 1

1. The authors conducted a study of synchronous gastric and colorectal cancers. Analyses were generally well conducted. Pseudo-precision is prominent in description of statistical data. Three significant digits are more than enough to describe central estimates, their 95% confidence interval, and p values. Currently, up to 5 significant digits are seen.

Response: Thank you for providing your valuable opinion. We have made revisions to ensure that the significant digits of hazard ratios (HR), confidence intervals (CI), and p-values are presented with no more than three significant digits. Consequently, these statistical data in the abstract, results, and table have been appropriately amended.

2. The authors should discuss the concept of etiologic field effect elaborated by Lochhead et al. (Mod Pathol 2015). This concept can explain why these patients might have higher risks of developing synchronous tumors.

Response: Thank you for your valuable advice. The etiological field effect theory can indeed be employed to elucidate the occurrence of DPGCC. We elaborate on this theory in the discussion section to provide a comprehensive explanation for the increased susceptibility of these patients to multiple primary cancers (Page Line).

Reviewer 2:

1. This study aims to analyze the clinicopathological characteristics and prognosis of synchronous and metachronous cancer in patients with double primary gastric and colorectal cancer (DPGCC). Although the retrospective study is interesting, there are many existing clinical reports related to the same subject. Therefore, it should address what clinical meaning could be emphasized compared to the previous reports. Please refer to the following articles: Korean J Gastroenterol 2013 62(1) 27-32; Cancer Research and Treatment Volume 42(4) 2010; Gastric Cancer

volume 19, 798–807 (2016); Korean Journal of Clinical Oncology 2018 14(2): 83-88.

Response: Thank you for your valuable comment. Our study focused on identifying the prognostic factors of DPGCC, with the objective of providing valuable insights for the development of effective treatment and follow-up strategies for these patients. We not only meticulously evaluated the impact of metachronous and synchronous on prognosis but also comprehensively analyzed the effect of treatment on prognosis. Furthermore, we have provided a comparative analysis with other similar studies in the discussion section and cited the literature you referred to.