

Format for ANSWERING REVIEWERS



May 29th 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: ESPS Manuscript NO 9794-edited.doc).

Title: Simultaneous Modulated Accelerated Radiation Therapy for Esophageal Cancer: A Feasibility Study

Author: Wu-Zhe Zhang, Jian-Zhou Chen, De-Rui Li, Zhi-Jian Chen, Hong Guo, Ting-Ting Zhuang, Dong-Sheng Li, Ming-Zhen Zhou, Chuang-Zhen Chen.

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 9794

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 (Highlighted in yellow). Below are point-by-point responses to the major comments.

Review #1

T1. "Background before aim?"

We have added a brief introduction about the background in the aim section of abstract. One problem about this is that it may exceed the word count limit.

T2. "Treated with radical radiotherapy? Chemotherapy?"

All CT datasets are selected from patients treated with radical chemoradiotherapy. This is information has been added to the method section of abstract and manuscript as well.

T9. "Since EC is one of the most common malignant disease in China (with estimated incidence and mortality approximately 22.4 and 16.8 per 100,000 inhabitants respectively in 2009) this issue is of a particular meaning". I propose this composition of a sentence to connect this paragraph better with the previous...

We have revised this sentence according to the reviewer's comment.

T18. "Don't need, sings. Ie.Spinal cord Dmax....Heart V40 etc. "

We made an additional dose constraint for spinal cord, SC-PRV (spinal cord plus 0.5cm margin), to take account of setup error, since spinal cord is a sensitive and critical structure. Regarding the heart and lungs, their radiation toxicities are determined by the dose-volume effect. Different dose gradients have

different maximum tolerant irradiated volume. Thus, we setup multiple dose constraints for both heart and lungs, according to international guidelines and our institutional instructions as well.

T5 and T20. "Not clear".

In the optimization process, fulfillment of the dose criteria for the PTVs received the highest priority, followed by the spinal cord, heart and lungs. Only when the criteria for PTVs were fulfilled, will the system consider the sparing of OARs. We have added this detailed information in the manuscript.

3 References and typesetting were corrected.

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

Sincerely yours,

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