

April 27, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 9739-review.doc).

Title: Prognostic role of gastrectomy with bursectomy in gastric cancer: A meta-analysis

Author: Wei-Song Shen, Hong-Qing Xi, Bo Wei, Lin Chen

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 9739

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

(1) Review **02572312**

①The selected studies are 4 but 5 are listed in Table 1. Reasons explained in the text should be corrected in table 1

Response: We have added supplementary statements and reasons in Table 1.

②Analyzed series do not follow strictly the guidelines including patients with stage 1 and 2. This reduces the interest of the statistical analysis.

Response: No large-scale studies have investigated the survival benefit of bursectomy. The Japanese Gastric Cancer Association's gastric cancer treatment guidelines recommended bursectomy for tumors with invasion of the serosa only based on small scale study and expert advice. There is no evidence of higher level and large-scale multi-institutional randomized controlled study. The prognostic role of gastrectomy with bursectomy was controversial. The applicable stage of gastric cancer is not explicitly. Based on those, eligible studies have clinical or pathological stage I-II patients. And, we do a subgroup analysis on serosa-positive patients. In the subgroup of serosa-positive patients, the analysis revealed that the bursectomy group had better overall survival than the nonbursectomy group.

(2) Review **00058136**

①Japanese gastric cancer treatment guidelines recommended bursectomy for tumors with invasion of the serosa, but not in T1/T2 tumors. However, the 3 eligible studies have clinical or pathological stage I-II patients. The stage of the tumor differed in 4 study group, which can potentially result in differences in the parameters measured. As an intended selection of the patients can make a serious bias, please describe the detailed tumor stage of the eligible 4 studies in the method session.

Response: No large-scale studies have investigated the survival benefit of bursectomy. The Japanese Gastric Cancer Association's gastric cancer treatment guidelines recommended bursectomy for tumors with invasion of the serosa only based on small scale study and expert advice. There is no evidence of higher level and large-scale multi-institutional randomized controlled study. The prognostic role of gastrectomy with bursectomy was controversial. The applicable stage of gastric cancer is not explicitly. Based on those, eligible studies have clinical or pathological stage I-II patients. And, we do a subgroup analysis on serosa-positive patients. In the subgroup of serosa-positive patients, the analysis revealed that the bursectomy group had better overall survival than the nonbursectomy group. This result supports Japanese gastric cancer treatment guidelines.

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 cursive script that reads "Lin Chen".

Lin Chen, Prof. MD

Dept. of General Surgery

Chinese PLA General Hospital

Beijing 100853, China.

Tel: +86-10-66938128

Fax: +86-10-68181689

E-mail: chenlinbj@163.com