

Format for ANSWERING REVIEWERS

August 25, 2014

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: manuscript_revised.docx).

Title: Nomograms for colorectal cancer: a systematic review

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Name of Journal: *World Journal of Gastroenterology*

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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

Reviewer #1:

Comments:

It is an interesting paper with a good review of a frequently disperse information. I suggest some changes to be improved:

a) A CONSORT flow-chart detailing how studies were selected or eliminated (174 -> 41 -> 28)

Response:

According to the reviewer's recommendation, a flow chart of study selection has been added as Figure 1 in the revised manuscript.

Comments:

b) A clear recommendation of which ones are (or not) applicable in clinical practice

Response:

It is difficult to provide clear recommendations on the applicability of nomograms in clinical practice, because each nomogram targets distinct patient populations and has different limitations. However, among the nomograms predicting stage I-III CRC prognosis, one by Weiser et al. (2008) for colon cancer and one by Valentini et al. (2011) for rectal cancer could be most promising in clinical practice, because these nomograms are based on a large number of patients, incorporate no variables unavailable in municipal hospitals, and are well calibrated. This discussion has been added to the "Nomograms predicting Stage I-III CRC oncological prognosis" section in the revised version of the manuscript.

Comments:

c) Specifying in the tables which parameters are included in each nomogram

Response:

Variables included in each nomogram have been added in the tables.

Comments:

d) Future directions in this field (needs and hopes, integration of biological parameters...)

Response:

In the field of prostate cancer, a number of nomograms predicting a wide variety of outcomes including cancer prognosis (BMC Cancer. 2015 May 1;15(1):338.), diagnosis (Eur Urol. 2013 Feb;63(2):201-9), and screening (J Clin Oncol. 2007 Aug 20;25(24):3582-8.) have been developed and validated. In contrast, the development of nomograms for colorectal cancer falls behind that for prostate cancer, because targeted patients and conducted validation studies remain limited. Further research aimed at the development and validation of new nomograms for colorectal cancer is required. This paragraph has been added to the “Conclusions” section (pages 10, lines 2).

Reviewer #2

In this study, the authors performed a systemic review that focuses on currently available CRC-associated nomograms, including those predicting oncological prognosis, short-term outcome of treatments such as surgery or neoadjuvant chemoradiotherapy, and future development of CRC. In general, this is a interest and well-written review and may have a potential significance for clinical practice of CRC.

Response:

Thank you very much for the comment.

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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