

**Name of journal:** World Journal of Hepatology  
**Manuscript NO:** 34300  
**Title:** Chemioterapy for HCC: the present and the future  
**Reviewer's code:** 02860797  
**Reviewer's country:** China  
**Science editor:** Xiu-Xia Song  
**Date sent for review:** 2017-05-01  
**Date reviewed:** 2017-05-08

## COMMENTS TO AUTHORS

This review focus on chemotherapy for Hepatocellular carcinoma systematically and summary most related clinical trials. 1.Since you think the effect of TACE combined with sorafenib is controversial, more available trials should be included, both positive and negative data should be discuss in detail. And for two trials you mentioned (SPACE, the trial from Kudo), please also show the data of overall survival. 2. The BRISK-PS showed overall survival between brivanib and sorafenib is the same, so could brivanib be an alternative choice as first line treatment? If not, discuss the reasons. 3.For the immunotherapy part, when you review the clinical trial of Nivolumab, the data should be precise. For example in their study they only get the data from 39 patients, so it should be 2/39 patients showed complete response? 4.please pay attetntion to some writing mistake, for example, 400ng\ml,p>0.001(SHARP trial).

## RESPONSE TO REVIEWER

*We would like to thank the reviewer for the attention in reviewing our article and for the interesting and constructing revision.*

1.Since you think the effect of TACE combined with sorafenib is controversial, more available trials should be included, both positive and negative data should be discuss in detail. And for two trials you mentioned (SPACE, the trial from Kudo), please also show the data of overall survival.

*Overall survoival data from SPACE trial and trial from Kudo were showed after the revision. Results about this combination are not very clear yet and phase III trial are still ongoing. Yet, we added latest results from retrospective studies and from the newest meta-analysis available.*

2. The BRISK-PS showed overall survival between brivanib and sorafenib is the same, so could brivanib be an alternative choice as first line treatment? If not, discuss the reasons.

*Data available about Brivanib are still insufficient in our opinion to express a strong opinion about this drug, but a more detailed comment was added in our review in the appropriate section.*

3.For the immunotherapy part, when you review the clinical trial of Nivolumab, the data should be precise. For example in their study they only get the data from 39 patients, so it should be 2/39 patients showed complete response?

*The data has been revised and the errors were corrected. We apologies for the inconvenient.*

4.please pay attetntion to some writing mistake, for example, 400ng\ml,p>0.001(SHARP

trial).

*We evaluated again our article looking for writing mistakes and subsequently fixing them. We apologies for the inconvenient.*

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 34300

**Title:** Chemioterapy for HCC: the present and the future

**Reviewer's code:** 03656600

**Reviewer's country:** 中国

**Science editor:** Xiu-Xia Song

**Date sent for review:** 2017-05-01

**Date reviewed:** 2017-05-15

### **COMMENTS TO AUTHORS**

Although some grammar problems, it is still a good review.

### **RESPONSE TO REVIEWER**

*We would like to thank the reviewer for the attention in reviewing our article and for the appreciation. We evaluated again our article looking for grammar problems and subsequently fixing them. We apologies for the inconvenient.*