

List of Responses

Dear Editors and Reviewers:

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "Body mass index is not a risk factor of short-term impacts after laparoscopy gastrectomy for gastric cancer in Asian patients A meta-analysis" (No. 41994). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval. Revised portion are highlighted in the paper. The main corrections in the paper and the responds to the reviewers' comments are as flowing.

Responds to the reviewers' comments:

Reviewer #1:

1. Comment: Material and Methods are not well-organized. It is very difficult to understand flow chart.

Response: Considering the reviewer's suggestion, we have made these sections luminous to the greatest extent according to the BPG format of meta-analysis.

2. Comment: Why total gastrectomy cases and early stage gastric carcinoma cases were not included or excluded in this study? The reason should be carefully explained in Material and Methods section.

Response: We are very sorry for our negligence in not illuminating the selection criteria. Owing to the insufficient representativeness of the sample in the study with "pathological stage" limit, we excluded 2 studies with this limit (1 for solely including patients with early stage gastric cancer and 1 for solely including patients with advanced gastric cancer). Considering the reviewer's comment, we have revised and made this part clearer (as highlighted) in Discussion section (page 12) according to the BPG format of meta-analysis.

Special thanks to you for your good comments.

Reviewer #2:

1. Response to comment: Why is "cholecystectomy" a reoperation and "percutaneous drain" an "intervention" Wouldn't be easier and more appropriate to consider all procedures performed due to a postop complication as a "reoperation"?

Response: Thank you for your careful work. However, neither "cholecystectomy" nor "percutaneous drain" has been involved in our study.

Special thanks to you for your good comments.

We tried our best to improve the manuscript and made some changes in the manuscript. These changes will not influence the content and framework of the paper. And here we did not list the changes but marked as highlighted in revised paper.

We appreciate for Editors/Reviewers' warm work earnestly and hope that the correction will meet with approval.

Once again, thank you very much for your comments and suggestions.

Best regards

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