

July 28, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: **ESPS-19616_Cleared_further revised.doc**).

Title: Radiofrequency ablation with or without transarterial chemoembolization for hepatocellular carcinoma: A systematic review and meta-analysis

Author: Ming-Zheng Hu, Shao-Fang Li

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 19616

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

Yes, we have updated the format according to the guidelines for Meta-analysis Articles.

2 Revision has been made according to the suggestions of the reviewer

- 1) We have a little more details about RFA and TACE therapy and the combined therapy.
- 2) We have made the results clearer in the revision
- 3) TACE was generally performed for about one week (typical period in Japan) or two week (average time in China, varies from 3 day to 1 month) and then followed by RFA. One or 2 months after the first session of radiofrequency ablation, dynamic CT was performed with the protocols to determine whether further RFA or TACE is needed.

- 4) The typical interval in Japan is one week, and this time in China varies from 3 days to 1 month (two weeks as an average).
- 5) It was conventional TACE, in which a mixture of iodized oil and chemical drugs (e.g. epirubicin hydrochloride) was injected until the mixture entered the intrahepatic branch of proper hepatic artery.
- 6) We have added the conclusion on 5 year RFS rate: Based on the available evidence, here is no difference between the RFA and the TACE+RFA groups in terms of 5 year RFS rate.
- 7) We have clear stated in the abstract that the paper compared trials done in China and Japan.
- 8) RR results were explained in an easy way for the people in the clinical trial field to understand.
- 9) We have asked a Biostatistian's help to verify our analysis and all the statistics related part and have acknowledged his contribution in the acknowledgement part.

3 More references were added and typesetting were corrected

Thank you again for giving us the chance of revising our manuscript and we hope it can be published in the *World Journal of Gastroenterology* with these improvements.

Sincerely yours,

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