

ANSWERING REVIEWERS

December 23, 2013

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: 5886-edited.doc).

Title: Stereotactic body radiotherapy for oligometastasis from colorectal cancer

Author: Atsuya Takeda, Naoko Sanuki, and Etsuo Kunieda

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 5886

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

Response to the reviewer 02451544

- 1) *From the comments by reviewer 02451544:Colon and rectum are not the same, stereotactic body radiotherapy Are valid, please discuss it.*

→ Surely colon and rectum cancer are not the same, however, this fact does not change the application of SBRT for oligometastasis from colorectal cancer, or contents we have reviewed. Therefore, we insert following sentences in introduction; "Although there exist somewhat different characteristics between colon cancer and rectal cancer, most articles investigated them together."

Response to the reviewer 00225366

- 2) *From the comments by reviewer 00225366:However, I think the authors may want to change the title of this work as it mainly focused on the review and recent study results of oligometastasis from colorectal cancer. It does not actually focus on the technique and delivery in stereotactic body radiotherapy, which are interested in by some readers.*

→ Thanks for the reviewer's suggestion. We wrote this review article aimed at clinicians including gastroenterologists, surgeons and oncologists. Therefore, this focused exclusively on clinical utility of SBRT for oligometastases, however, did not refer to the technique and delivery methods of SBRT. We agreed with the reviewer's suggestion and changed the title into "Role of stereotactic body radiotherapy for oligometastasis from colorectal cancer". We think the technique and delivery methods of SBRT should be provided at reviews in journals specialized in radiation oncology. We would like to write them in another chance.

Response to the reviewer 02510166

- 3) There are some typos?: ?idoseose? (in Tables).

→ We corrected some typos.

- 4) Fractionation times are not reported. Were the fractions delivered daily, or once weekly, or once monthly?

→ We inserted the information of the fractionation times into the tables.

5) The tables' layouts are not optimal.

a) Links to the references are missing. Suggestion: added reference number.

→Responding the suggestion, we added reference numbers.

b) The columns "total dose/fraction and prescription" mix two different classes of information, and treatment times are missing. Suggestion: split into two separate columns, one column for dose/fraction/time, and one column for prescription specification.

→Responding the suggestion, we made three columns; dose/fraction, time, and prescription specification.

c) Some cells are excessively cluttered and are inconsistently organized. If a published series used different fractionation schedules, one row should be allocated to each fractionation schedule. This was so done in the manuscript regarding 2011 Rule and 2011 Vautravers, but was inconsistent regarding 2006 Wulf.

→Responding the suggestion, we remade the tables.

6) Discussions: should provide insight on why the series are small.

→Responding the suggestion, we added the following sentence; "We do not think the reasons for the small sample sizes and heterogeneous characteristics are uncommon indications or negative outcomes of SBRT for oligometastasis. In fact,"

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

Atsuya Takeda, MD

Radiation Oncology Center,

Ofuna Chuo Hospital,

6-2-24, Ofuna, Kamakura, Kanagawa, 247-0056, Japan.

Telephone: +81-467-45-2111 **Fax:** +81-467-48-3197

E-mail: takeda@1994.jukuin.keio.ac.jp

1) Response to the reviewer 00070056

From the comments by reviewer 00070056:the manuscript is poorly written, such as "is" should be "are" in the second paragraph in the "Epidemiology" section. The authors need overview the manuscript carefully to decrease the errors. The manuscript needs minor revision before it is accepted for publication in the journal.

→The manuscript had undergone a proofreading process by a native speaker by a English language editing company (JAM Post, Seattle, WA, <http://www.jamp.com/en/>). According to the reviewer's comment on language errors, we sent the manuscript to the English proofreader again and inquired whether some grammar correction was needed in the concerned sentence.

Here is the answer from the English editor below:

The editor carefully reviewed the edited version again and made the following comments.

Regarding this sentence: "The broad spectrum of HCC epidemiology and treatments is expected to affect prognosis." I indeed thought that "treatments" was part of the spectrum. "Spectrum" is a singular word ("spectra" is the plural) so requires a singular verb ("is"). How many items the spectrum refers to does not affect the conjugation of the verb. Just as "A basket of oranges and apples was given to the girl" - one would not say "A basket of oranges and apples were given to the girl," since there is only one basket. In this case, there is only one spectrum; thus, "is" is correct.

The editor doesn't think that there are grammar problems. The reviewer may be satisfied with further changes but it would require changing the author's style and voice, or making changes that aren't really necessary but are made to satisfy the reviewer.

We agree with the proofreader and do not wish to change the sentence because it would change the meaning.

2) Revision has been made according to the suggestions of the reviewer 01435993.

From the comments by reviewer 01435993:3. There are a lot of abbreviations in the article. Abbreviation list could help people to read the article. 4. It is not clear whether those figures are generated from their own study or cited from other publications. If it is from their own study, do they have some kind of ethics approval procedure?

→An abbreviation list was added at the end of the text in the manuscript.

Figures are generated our own study which received an IRB approval in our institution. In addition, we always obtain an informed consent from all patients. A sentence mentioning that was added as acknowledgements at the end of the text.

3) Some items in Table 3-4 were amended to delete some superfluous data.

4) We attach a certificate of proofreading by medical English editing services (JAM Post, Seattle, WA, <http://www.jamp.com/en/>).