

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 6755-review.docx).

Title: Utility of PET/CT in diagnosis, staging, assessment of resectability and metabolic response for pancreatic cancer

Author: Xiao-yi Wang, Feng Yang, Chen Jin, De-liang Fu

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 6755

Thank you very much for giving us the opportunity to revise our review. Here we would like to submit the revision for your consideration. Please find enclosed the revised manuscript entitled "Utility of PET/CT in diagnosis, staging, assessment of resectability and metabolic response for pancreatic cancer" by Xiao-yi Wang, Feng Yang, Chen Jin, and De-liang Fu. We sincerely appreciate the reviewer's comments and felt encouraged by their positive feedback. The concerns of the reviewers and their suggestions for improvement of the manuscript have been addressed, and the amendments are highlighted in yellow in the revised manuscript. Below we provide point-by-point responses to the comments. We hope that the revision is acceptable and are looking forward to your response. Thank you very much for your help.

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

(1) Reviewer 1#

Reviewer 1# recommended more details of the differential diagnosis of pancreatic cancer and chronic pancreatitis, including the comparison with enhanced CT, MRI, and EUS, the optimal time to perform PET/CT, and point of interpretation of PET/CT result.

REPLY: The differential diagnosis of pancreatic cancer from chronic pancreatitis has always been a challenge for clinicians. MDCT remains the mostly used method, but the reported SE and SP of CT scan for differentiating chronic pancreatitis from cancer was 82-94% and SP of 83-90% [1]. MRI showed similar results as CT scan, with SE and SP of 93% and 87%, respectively [2]. Also, the diffusion-weighted imaging does not facilitate differentiation of pancreatic cancer from chronic pancreatitis [124]. Till this day, the value of FDG-PET/CT in the diagnosis of PC from CP is still controversial. Consensus has not been reached on whether or when PET/CT should be applied. So far, the most precise method reported is EUS-FNA, with a sensitivity of 93%-95.3% and a specificity of 92%-99.5% [125,126].

We have add extra information on this topic, newly introduced context is highlighted in yellow

(2) Reviewer 2#

Reviewer 2# suggested to add information on radiopharmaceuticals in neuroendocrine tumors, e.g. Ga68-DOTA-TOC, to give the interested reader also complementary information in terms of SSTR-expressing pancreatic tumors which could form the basis for PRRT. He/she also recommended to mention the false positive of PET/CT as a drawback in the primary diagnosis and its advance in detection of recurrence under highly suspected situation.

REPLY: We have add extra information on all three points, newly introduced context is highlighted in yellow

3 References and typesetting were corrected

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

Sincerely yours,

Xiaoyi Wang M.D.

A handwritten signature in black ink that reads "Xiaoyi Wang". The signature is written in a cursive, flowing style.

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