

February 23, 2017

Prof. Damian Garcia-Olmo; Prof. Stephen Strom; Prof. Andrzej Tarnawski
Editors-in-Chief, *World Journal of Gastroenterology*

Dear Prof. Garcia-Olmo, Prof. Strom, and Prof. Tarnawski,

Attached please find our manuscript entitled “Performance of 18-fluoro-2-deoxyglucose positron emission tomography for esophageal cancer screening” (Number ID: 03529644) by Sekiguchi M et al.

We would like to thank the editor and the reviewers for their insightful comments. We have revised the manuscript according to the suggestions noted by the reviewers. A detailed response to each of the Reviewers’ comments is attached below. We also have added “Comments” in pages 16 and 17.

Thank you very much for handling the resubmission of our manuscript.

Sincerely,

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Reviewer 1 (03362724)

The manuscript is well designed. Although it is known that PET-CT is not used for screening of the EC, as the author mentioned, limited data are available on the performance of FDG-PET the EC screening. It is documented with this study. The limitations were stated clearly. The number of the patients in this study, is really good enough for the best results.

We sincerely appreciate the reviewer's positive evaluation and comments.

With regard to language, our manuscript was revised by a native speaker as we provided a language editing certificate, and thus, we believe that there is no problem with the language.

Reviewer 2 (02446450)

The authors investigate the value of PET for screening an asymptomatic population for oesophageal cancer. This is a retrospective analysis involving 8438 subjects. Only 28 cases of oesophageal cancer were identified. Only 1 on these tumours was apparent on PET. 51 individuals had PET uptake in the oesophagus. 1 one these was due to tumour, the remainder were benign. The authors conclude that PET has a very low sensitivity and PPV for detecting oesophageal cancer in an asymptomatic population. This is a nicely written paper from Japan. Due to the low sensitivity/PPV the authors conclude that PET is not a useful tool for screening for oesophageal cancer. The authors acknowledge that this is most likely due to the small size of lesions within an asymptomatic population. The study is well conducted and well thought through. The results are clearly presented and the conclusions are sensible. Although the results are 'negative' I think the conclusions are useful. One error - line 3, page 11: 'esophagostomy' should be 'esophagectomy'

We are sincerely grateful for the reviewer's positive evaluation and comments. We also greatly appreciate the reviewer's pointing out our spelling mistake. We have changed "esophagostomy" to "esophagectomy" (page 11, line 3).