ANSWERING REVIEWERS:

Reviewer#1:

ScientificQuality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: We carefully read the original article (Ma et al) and the reference in the discussion part (Zhou et al). The author of this comment has rigorous scientific research thinking and carefully read the literature. It is found that the references cited in the discussion part of the original text are not very appropriate. Although the sentences of the article in Zhou et al clarified that the level of CA199 can predict the prognosis, the two research groups are completely different, so it is not appropriate to cite the references of Zhou et al. Lingling Wang, MMSc, Zheng Liu, M.D. Dept. of Colorectal Surgery National Cancer Center/ Cancer Hospital, Chinese Academy of Medical Science 17 Panjiayuan Nanli, Chaoyang District, Beijing, China, 100021

We thank you for accepting to review our article and for your valuable comments. We hope that you find our ''Letter to the Editor'' suitable for publication in World Journal of Gastroenterology.

Reviewer #2:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: The manuscript entitled "Is CA19-9 effective in predicting chemotherapeutic response in patients with synchronous liver metastases with colorectal cancer?" raised a question regarding comparison of CA19-9 levels in CRC patients and using CA19-9 as a promising indicator for predicting response to chemotherapy. I believe the issues raised by the authors will help improve the conclusions in the original article. I suggest to publish the manuscript.

We thank you for accepting to review our article and for your valuable comments. We hope that you find our ''Letter to the Editor'' suitable for publication in World Journal of Gastroenterology.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: To elaborate predictive scores for the response to treatment in complicated diseases such as synchronous liver metastases in colorectal cancer would allow significant economic and human suffering savings. [Cancer Radiother 2017; 21 (6-7): 539-543] The article published in our journal [World J Gastroenterol 2021 Oct 14; 27 (38): 6465-6475] does a good job through a retrospective study that, although it is not definitive, it gives clues for a prospective one to find a combination of biological elements that answer the question of to what extent chemotherapy is useful in these patients. In the letter to the editor under review, the authors question the use of CA19-9 in this score. The question is well founded and should be published as it puts into context an interesting issue: to what extent is a nonspecific marker useful in combination with other biological markers? Could the observed significance be a statistical bias? I think the authors of the first article should give their point of view.

We thank you for accepting to review our article and for your valuable comments. We hope that you find our ''Letter to the Editor'' suitable for publication in World Journal of Gastroenterology. Our manuscript has supplementary files for the Non-Native Speakers of English Editing Certificate which is Grade A: priority publishing; no language polishing required after editing.

Reviewer #4:

Scientific Quality: Grade D (Fair)

Language Quality: Grade A (Priority publishing)

Conclusion: Rejection

Specific Comments to Authors: Dear authors, I've read your article regarding the value of CA19-9 in colorectal cancer with interest. In my opinion the discussion point should be moved to why is Ca19-9 not recommended by ASCO guidelines or the clinical and pathological characteristic of patients with positive Ca19-9 vs patients with negative CA19-9 instead of stage groups.

We thank you for accepting to review our article and for your valuable comments.
In this article, we planned to draw attention to the conclusions of the authors by comparing CA 19-9 levels with the patient groups who are not at the appropriate stage. Currently, Ma et al. reported in their retrospective study that CA 19-9, stage and radiomic-clinical nomogram were used to predict the chemotherapeutic response in colorectal cancer patients with synchronous liver metastases at the same stage. (Ma YQ, Wen Y, Liang H, Zhong JG, Pang PP. Magnetic resonance imaging-radiomics evaluation of response to chemotherapy for synchronous liver metastasis of colorectal cancer. World J Gastroenterol. 2021 Oct 14;27(38):6465-6475. doi: 10.3748/wjg.v27.i38.6465). However, what we want to emphasize in this article is the comparison of patients who are not in the appropriate stage. CA 19-9 values in ASCO guidelines were not considered appropriate due to insufficient data. Of course, we think that there may be articles and different opinions on this subject. We hope that you find our ''Letter to the Editor'' suitable for

publication in World Journal of Gastroenterology.