

Format for ANSWERING REVIEWERS



April 5, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 15387-review.doc).

Title: Current methods of staging and restaging of the mediastinal nodes in non-small-cell lung cancer

Author: Marcin Zielinski

Name of Journal: *World Journal of Respiriology*

ESPS Manuscript NO: 15387

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

Answers to the Reviewer 1.

1. This is not a study. It should be a review. There is no any analysis. The authors just cited the article that had already statistically summarized the previous studies. Therefore, the authors should not use the format of original article in this manuscript.

Reply:

This article expressed my own view on staging based on my experience. I made a review of all methods of staging but I presented my own opinions and, finally I presented my own algorithm of staging and restaging

2. Introduction. This manuscript is about methods of staging. However, it begins with treatment and prognosis that do not match to the topic. It is needed to be changed.

Reply:

staging is used BECAUSE the results of treatment of NSCLC are so bad. It was explained in the next sentence. In my opinion there is no need for change

3. The authors summarized the diagnostic efficacy of various methods by using only one paper. (Ref 15 Methods for staging non-small cell lung cancer: Diagnosis and management of lung cancer, 3rd ed: American College of Chest Physicians evidence-based clinical practice guidelines. Chest. 2013;143(5 Suppl):e211S-50S.) In my opinion, if I have to spend my time to read the review about Methods for staging non-small cell lung cancer, I prefer to read Ref 15 rather than this manuscript. This review is not better than the previous. In addition, it is not as good as the previous.

Reply: The ACCP publication by Silvestri et al was used several times, indeed.

This is an outstanding publication.

However, it was used in a critical way as was pointed-out in the discussion

4. The authors should consider professional and/or native English speaker advice for writing the academic

manuscript. In addition, the authors should check the manuscript before submission. For example, Page 7 [21-6]; Page 11 [Szlubowski56], [57-59 von Bartheld

Reply:

The paper was checked by a native speaker.

The errors were corrected.

Answers to the Reviewer 2

COMMENTS TO AUTHORS: GENERAL COMMENTS Review article on the Current methods of staging and restaging of the mediastinal nodes in non-small-cell lung cancer. Topic of interest serviced properly. References are acceptably date: \geq 60% (44/724) of the last 5 years. The structure of the article and its general outline is correct (Title, Running title, Keywords, Abstract, Introduction, Methods, Results, Discussion, Conclusions and References). There are no ethical problems. SPECIFIC COMMENTS: TITLE: Correct. Specific, it adequately contains the primary endpoint. (Words: 14). ABSTRACT: Define and explain the concepts well properly structure review article. Key words: Correct INTRODUCTION: Clear and correct introduction. Well structured. Updated and nicely summarizes the current reality of the diagnosis and treatment of lung cancer in different TNM stages. Comments on new technologies (proteomics or metabolomics) for possible future application. Clearly indicates the purpose of the article. The DIFFERENT SECTIONS (Methods, Results, Discussion, Conclusions and References) are clear and well structured, however:

1.- Methods: The selection criteria, in addition to included in PubMed (2009-2014) are unclear. Not a Systematic Review: Have you considered using the methodology PRISMA? Moher D, Liberati A, Tetzlaff J, Altman DG; PRISMA Group. Preferred reporting items for systematic reviews and meta-analyses: the PRISMA statement. Int J Surg. 2010;8(5):336-41. Epub 2010 Feb 18. Erratum in: Int J Surg. 2010;8(8):658. [Medline: 20171303] [doi: 10.1016/j.ijso.2010.02.007]

The selection criteria were subjective, indeed.

I chose the articles which were the best, in my opinion. I also included several own articles to present my own view to show what is the optimal staging - in my opinion, again.

Therefore - this is not a systematic review, so I couldn't prepare the paper according to the PRISMA methodology.

Should indicate the keywords used in the search strategy in PubMed 2.-

Reply: the keywords were added

Results: Appropriate wording and highlights the interesting aspects of the review. Adequately describe the indications, advantages and disadvantages of different diagnostic techniques. Many comments regarding the results could be included in the discussion.

3.- Discussion and Conclusions: Correct.

4.- References: Review (41?). Review all literature. Zielinski M: Author with various and relevant publications on the topic reviewed. The references are up to date ($>$ 60% of the last 5 years) in adequate numbers (72 references).

5.-Tables: Value could be the inclusion of a summary of the results table.

Reply: it was added

Diagnostic technique analyzed Author Reference (year) Design Sample size ... The review is presented in a clear and correct form.

MINOR COMMENTS See minimal comments on the attachment
The errors were corrected.

Answers to the Reviewer 3

This is a system review regarding the current methods of primary staging and repeated staging (restaging) of the mediastinal nodes in non-small-cell lung cancer. This review is informative. I have the following comments:

(1) a diagram should be used to list all the sensitivity and specificity of these methods;

Reply: it was added

(2) a diagram should be used to describe the strategy to use these methods in various patients

Reply: it was added

Answers to the Reviewer 4

The author analyzed the current methods of primary staging and repeated staging (restaging) of the mediastinal nodes in non-small-cell lung cancer. This is a well-written review.