Response to Reviewers

Reviewer #1:
Scientific Quality: Grade A (Excellent)
Language Quality: Grade A (Priority publishing)
Conclusion: Accept (High priority)
Specific Comments to Authors: This work is well written, it is logical and it provides some new inspiration. I think this review is sufficient for acceptance.

Author Response: Thank you for your comments

Reviewer #2:
Scientific Quality: Grade C (Good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Major revision
Specific Comments to Authors: This paper is a systematic analysis of the literature;

- What are the diagnostic criteria for hepatic metastasis of pancreatic cancer?

  There were no specific diagnostic criteria mentioned. Synchronous metastases were either diagnosed preoperatively using cross-sectional imaging or intraoperatively with frozen section. Metachronous metastases were diagnosed with cross-sectional imaging. A sentence was added in the results section to clarify this.

- How to judge the operability?

  There were no specific evidence or criteria for operability mentioned in the studies. As all studies were performed in specialist centres the decision on operability would have been made after multidisciplinary cancer team discussion based on patient (fitness, patient wishes etc) and technical factors (proximity to vascular structures, number and location of metastases, functional liver volume etc). A sentence was added in the results section to clarify this.

- What is the non-anatomical resection mentioned in the article?

  A non-anatomical liver resection is a standard surgical procedure which involves resection of tissue from the liver in a manner which does not involve resection of an anatomical segment of the liver.

- Ultrasound-guided radiofrequency ablation or CT-guided radiofrequency ablation? Are they different from the prognosis of hepatectomy?

- There is limited available evidence regarding ablation of liver metastases in PDAC patients. This is not the standard of care and not recommended in any international guidelines. Therefore it is beyond the scope of this review to compare these outcomes. However this was acknowledged as a limitation in the relevant section of the discussion.

Thank you for your comments
Reviewer #3:
Scientific Quality: Grade C (Good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Minor revision

Specific Comments to Authors: Current review is focused on a relevant topic, considered the dismal prognosis of pancreatic adenocarcinoma. The paper is well written. However, I'd suggest some revisions:
- Results: the authors state that 10 articles have been finally selected, of whom 9.. and 4.; I do believe they should specify how many studies include both synchronous and metachronous metastases - Did the type of surgical intervention affect the outcomes? - Where the 10 included studies conducted in tertiary centers with a dedicated pancreas unit? Please specify whether this affected the results.

Author Response: Thank you for your comments

- A sentence was added in the result section detailing the number of studies that included synchronous and metachronous metastases as suggested
- 3 studies have reported the relationship between the extent of liver resection and survival. There was no significant association found. A sentence clarifying this was added in the results section.
- This review included a mix of single- and multicentre studies. All resections were performed in specialist units. A sentence clarifying this was included in the results section.