Reviewer’s code: 05721372

Comment:

Author’s response:
The authors appreciate for the comments from the reviewer. It should be noted the red mark in the manuscript represents new addition.
According to the comment from reviewer, we have edited manuscript to a professional English language editing company to polish the manuscript further. We have revised in the manuscript according to the suggestions form the reviewer (line 251-256). The corresponding contents have been revised in the latest version manuscript uploaded and named 70516-Supplementary-Material-revision.docx.


Specific Comments To Authors: The manuscript elaborated a low-coverage whole-genome sequencing assay for the risk stratification of gastric cancer. I find it an interesting study. Figure 3 the picture quality is poor. Is there any copyright? The table uses a three-line table. What is the difference between the classification proposed by the author and other different types of gastric cancer and their diagnosis? Scientific Quality: Grade C Language Quality: Grade B Recommendation: Conditional acceptance.

Author’s response:
The authors appreciate for this suggestion. We have redrawn and improved the quality of Figure 3. The corresponding Figure 3 has been revised in the latest version manuscript uploaded and named 70516-Supplementary-Material-revision.docx.

1. 

2. We have made corrections in the corresponding tables of the manuscript according to the Science editor’s comments. These tables (table1 and table2) were all revised in a three-line form. The corresponding contents have been revised in the latest version manuscript uploaded and named 70516-Supplementary-Material-revision.docx.

3. We further evaluated the difference between the classifications proposed in our study (molecular subtypes: EBV+, H. pylori+, and CIN+ types) and Borrmann type, a classic gastric cancer classification widely used currently. Prognostic analysis was chosen as a pointcut to compare the two different classifications (molecular type and Borrmann type). As a result, patients with different molecular subtypes showed
distinct prognoses by long rank test \((p=0.019)\), in which CIN+ patients were found to have the worst survival with a median OS less than 500 days. However, no significant difference was founded among the Borrmann types \((p=0.078)\) (Figure 5). It may indicate that the molecular subtypes in our study have advantages in guiding the prognosis of patients with gastric cancer. However, more clinical evidences are needed to support this argument owing to the limited sample sizes in this study \((\text{line } 152, 232, 237-239, 280-286)\). The corresponding contents have been revised in the latest version manuscript uploaded and named 70516-Supplementary-Material-revision.docx.
Figure 5: Overall survival among Borrmann types of gastric cancer.
Company editor-in-chief:

Comment:
I recommend the manuscript to be published in the World Journal of Gastrointestinal Oncology. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: https://www.wjgnet.com/bpg/gerinfo/240.

Author’s response:
According to the comment from Company editor-in-chief, we have edited manuscript to a professional English language editing company to polish the manuscript further.