

Dear Yuan Qi, Science Editor, Editorial Office

World Journal of Gastrointestinal Oncology

Manuscript ID: 24053

Manuscript Title: Management of Colorectal Neoplasia During Pregnancy and in
The Postpartum Period

Thank you for your review of our manuscript. We appreciate the review and the opportunity to respond to the reviewer's comments. Please find below our responses to the comments of the reviewers. The manuscript has been revised to incorporate these responses as indicated. The revisions and changes have been presented bold and underlined. We hope that the changes and explanations offered will make the manuscript more acceptable for publication.

Yours sincerely,

Gokhan Ozuner MD FACS FASCRS

Responses to reviewers

Reviewer 1:

Comment 1: I read with interest the manuscript "Management of Colorectal Neoplasia During Pregnancy and in The Postpartum Period". It is a single Center retrospective study where the Authors describe 8 successful colo-rectal resections for cancer in 3 pregnant women and in 5 women in the immediate post-partum period. I would like the Authors to explain why they consider these 2 groups (pregnant women and post-partum women with colorectal cancers) as one category. I would imagine that pregnant women would present a different and most likely more challenging set of issues to deal with. Therefore it would appear more appropriate to limit the discussion to those 3 former cases only.

Answer: We agree that pregnant women have different and more challenging set of issues than postpartum women. The five patients who were diagnosed in the immediate postpartum period had symptoms during their pregnancy and their diagnosis was delayed. One aim of our study is to point out that certain symptoms during pregnancy should be carefully investigated as pregnancy may mask symptoms and signs associated with colorectal neoplasia. In our discussion, we elaborate on this issue and our title reflects the management of colorectal neoplasia during pregnancy and in the postpartum period.

Reviewer 2:

Comment 1: In this retrospective study by Aytac et al. the authors are presenting their experiences in the management of colorectal neoplasia during pregnancy and in the postpartum period. This is a well written paper with insightful, thoughtful and helpful observations which are a result of serious and hard work from an experienced team of experts in the field of colorectal surgery. However, there are several issues that have to be considered: 8 patients between 8/1997 and 4/2013 who were diagnosed with colorectal cancer during pregnancy or in the postpartum period were reviewed. Three patients were diagnosed during pregnancy and underwent surgery prior to

delivery. The other five patients were diagnosed after delivery. The authors mention that their study is one of the largest single center experiences on this topic. The small number of patients in a large period of nearly 26 years is mainly because of the infrequent disease pattern during pregnancy. The small number of this study produces a bias that makes a statistical statement impossible. Therefore their conclusion that surgery for colorectal cancer during pregnancy can be performed safely without compromising maternal and fetal outcomes should be handled with caution. Also the length of the investigation period and the follow-up between 0.2 and 192 months are negative aspects of the study. In the discussion it is written that the surgical treatment surgery for colorectal cancer is similar for pregnant and non-pregnant patients. What do they mean with similar? We are asking the authors to explain this in detail. Nevertheless the treatment of pregnant cancer - patients is of high interest and further investigations for concluding evaluation are still lacking. Even though the instant study is only retrospective. Additional description of the mentioned surgical treatment for pregnant and non-pregnant patients etc. like suggested above, should be considered. Summarized, the study is accurate researched, the results are presented clearly and the discussion is well presented. Therefore after minor revision we recommend to publish this study in The World Journal of Gastroenterology.

Answer: We have not performed any statistical analysis as our numbers are small but merely stated that surgical intervention was no different than non pregnant females. We agree with the reviewer since our numbers are small, our conclusion that colorectal surgery in pregnant women is safe and does not have a negative impact on maternal and fetal outcomes needs some reservation. We addressed this point in the discussion and revised the conclusion.

The surgical procedures performed in these patients are not different than procedures that are performed for non-pregnant females in the same stage with colorectal neoplasia. In the pregnant patients, 1 anterior resection with an end colostomy, 1 low anterior resection and 1 subtotal colectomy was performed. The patients who underwent surgery in the postpartum period had

1 synchronous low anterior resection and liver resection, 1 extensive left colectomy, 1 transanal resection, 1 ileocecal resection, and 1 right colectomy. The treatment strategy for colorectal cancer should be no different for pregnant and non-pregnant patients in terms of the aim which is potential cure of the disease.