

ANSWERING REVIEWERS



November 2, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 13356-review.doc).

Title: Hepatectomy versus radiofrequency ablation for colorectal liver metastasis: A propensity score analysis

Author: Huisong Lee, Jin Seok Heo, Yong Beom Cho, Seong Hyeon Yun, Hee Cheol Kim, Woo Yong Lee, Seong Ho Choi, Dong Wook Choi

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 13356

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

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

Review comment:

I reviewed the factors matched in this study and found it lacked of liver function evaluation (for example: Indocyanine green retention test) and comorbidities. Clinically, liver function and comorbidities should be initially considered when a patient is determined to receive operation or not. Patients with worse liver function or more comorbidities may have more potential to be diverted to non-operative treatment. Could the authors afford us such information?

Answer:

We did not performed indocyanine green (ICG) retention test in every patients with colorectal liver metastasis. We routinely checked ICG retention rate in selected patients with chronic liver disease. The ICG test is usually within normal range in most patients when there are no liver disease. Therefore we could not take the ICG clearance test for calculating propensity score.

We searched the comorbidities of patients who enrolled in this study. There were no significant differences in liver cirrhosis, diabetes mellitus, hypertension, cardiovascular disease and pulmonary disease between the two groups. We supplemented the existence of comorbidity in table 1. However, we mainly focused on oncologic outcomes after RFA and hepatectomy. Therefore, we did not take the existence of comorbidities for calculating propensity score.

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

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