Reviewer's report

**Title:** Application of tumor-node-metastasis staging 2002 version in locally advanced hepatocellular carcinoma: is it predictive of surgical outcome?

**Version:** 3  **Date:** 6 August 2010

**Reviewer:** Matthias M Dollinger

**Reviewer's report:**

2 points remain, which I feel should be corrected before publication of the manuscript:

1) You should split the baseline data according to the subgroups (Gp 1-4) or at least assess if there are major differences (e.g. Child-Pugh or MELD score) which could influence survival.

2) Although there are no randomised controlled trials comparing resection and best supportive care or other treatments, you still have to mention the survival data in your discussion. The untreated median survival you mentioned (Am J Oncol 1998, Hepatology 1999) is not restricted to Child A patients and Ruzzenente (J Gastrointest Surg 2009) reports on a highly selected (only 25% of assessed patients) small group of patients with HCC and vascular invasion where he just reaches significance. In contrast, in the Sharp sorafenib study (NEJM) you have a placebo group (natural history) with similar baseline characteristics as in your patients, who survived longer (7.9 months). In your discussion, you should thus not only raise the question of adjuvant therapy but of treating respective patients first line with other modalities.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

no change