Reviewer's report

**Title:** PR-104 combined with gemcitabine or docetaxel in a phase Ib study of patients with advanced solid tumours

**Version:** 2  **Date:** 27 August 2012

**Reviewer:** William R Schelman

**Reviewer's report:**

1. Major Essential Revisions - None. This is a clear, well-written manuscript that provides a concise account of this study.

2. Minor Essential Revision - In 'Drug administration and dose escalation schema' of the Methods section on page 7, please describe the dosing schedule of PR-104 on days 1 and 8 of a 21 day cycle when administered with gemcitabine. This is described in the results section but should be defined earlier.

3. Minor Essention Revision - In Table 1, please specify the subtypes of 'gastrointestinal tumors' since these combinations may be more likely to have activity only in certain types of GI cancers.

4. Discretionary Revision - In the results discussion, several patients were described as having received > 2 cycles of therapy. It may be instructive to describe low-grade toxicities that were observed when patients received multiply courses of treatment in terms of tolerability.

5. Discretionary Revision - In the discussion, the author may consider a comparison of tolerability and activity to other similar hypoxia-activated agents (e.g. TH-303 +/- gemcitabine or docetaxel).

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

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing financial interests

I was the study chair at the UWCCC for the phase I study of TH-302 in combination with gemcitabine, docetaxel or pemetrexed in advanced solid tumors and for the phase II randomized study of TH-302 in combination with gemcitabine in advanced pancreatic cancer.