Reviewer's report

Title: Prediction of Metachronous Multiple Primary Cancers Following the Curative Resection of Gastric Cancer

Version: 1 Date: 20 February 2013

Reviewer: Isao Nozaki

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(Comments for authors)

The authors characterized synchronous and metachronous MPC after curative GC resection in this paper. They reported the most prevalent site of MPC and the risk factors for metachronous MPC. Since the prognosis was poor in the patients with MPC, the authors developed a nomogram to predict the metachronous MPC to detect it at an early stage. Although this clinical study is interesting, I think the authors should focus on the following concerns.

Major compulsory revisions
1. It is expected that the GC patients with metachronous MPC will have a poorer prognosis because they are 6 year elder than the patients without MPC (Table 2). Moreover, the incidence rate of the metachronous MPC after GC surgery was only 1.2% (38/3066). Is it really beneficial for the GC patients to predict the high risk patients for MPC or to have a screening for all of them to detect metachronous MPC? The authors should discuss their rationale for this concern.
2. In order to evaluate the clinicopathological features of MPC more clearly, the MPC group should include GC patients with pre-gastrectomized metachronous primary cancer.

Minor essential revisions
1. The authors analyzed that one of the risk factors was multiplicity of GC for metachronous MPC. However, the incidence rate of multiplicity is too low (3.6%), compared with the previously reported rates. What is the definition of the multiple gastric cancer in this study? Pathologically or clinically? I think the multiplicity group should include GC patients with multiple cancers in the remnant stomach or with pre-gastrectomized EMR/ESD history.
2. The authors should show the clinical staging (UICC) of the MPC in the 70 GC patients with MPC.

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

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