Reviewer’s report

Title: Prospective, open, multi-centre phase I/II trial to assess the safety and efficacy of neoadjuvant radiochemotherapy with docetaxel and oxaliplatin in patients with adenocarcinoma of the oesophagogastric junction

Version: 1 Date: 6 September 2012

Reviewer: Donald Richards

Reviewer’s report:

Dear Colleagues:

I have had the opportunity to review the study report of a phase I/II trial to assess the safety and efficacy of docetaxel and oxaliplatin with radiation therapy in patients with adenocarcinoma of the GE junction. The paper is well written and addressed a relevant problem in the treatment of adenocarcinoma of the GE junction. The study was well designed. I do have a few concerns.

Major Compulsory Revisions:

1. The author’s report a standard 3 x 3 phase I clinical design. The maximum tolerated dose was determined to be dose level 2. At dose level 3 a total of 7 patients were enrolled with 5 DLTs. Standard phase I design as outlined in the paper is once 2 DLTs have occurred no further patients should be enrolled into that cohort. I believe the authors need to explain how recruitment was performed for this study, what was the time period for determining a DLT, did DLTs occur late, was the waiting time to assess DLTs too short? This appears to be a clear deviation from the study plan.

2. Table 2: Defining the dose limiting toxicities per dose level is inadequate. The DLTs should be more specifically outlined in this table including whether these were grade 3 or 4.

Minor Essential Revisions:

1. Minor revisions include page 14, second paragraph, the first sentence regarding results of only one clinical trial using oxaliplatin and docetaxel lacks a verb.

2. The title page listing the authors’ affiliations contained Roman numerals which appear to be out of place. This is in the first and second line.

Discretionary Revisions:

1. A total of 18 patients underwent planned surgery, yet pathological information was available on only 13 patients. An explanation of the reason for this would seem reasonable since pathology reports should be available on any patient undergoing surgery.
2. The combination of docetaxel and oxaliplatin has been reported in advanced adenocarcinoma of the GE junction and subsequently evaluated in a randomized phase II trial reported by Van Cutzem and colleagues at ASCO 2012. The Gate trial compared this combination with the addition of 5-FU or capecitabine. The doublet was far less effective in that randomized phase II trial. This trial was obviously without radiation but a comment by the authors regarding the possible inferiority of this combination in the treatment of advanced disease would seem reasonable.

**Level of interest:** An article whose findings are important to those with closely related research interests

**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 interests.