Reviewer’s report

Title: Stereotactive Ablative Radiotherapy (SABR) in inoperable oligometastatic disease from colorectal cancer: a safe and effective approach.

Version: 2 Date: 30 June 2014

Reviewer: Yuan Zhiyong

Reviewer’s report:

Major revise:
1. The follow-up time of some patients was a little shorter. And it is maybe influence the analysis of survival time.
2. Some factors, for example, chemotherapy, need included in the univariate analysis for the LC, PFS and OS.
3. Why did the authors decide the dose regime 75Gy/3F (it is hardly reported in other papers) for the liver lesions while 48/4f or 60Gy/3f for lung lesions? Did the author really believe 75Gy/3F is needed for the treatment.
4. The paper should provide the details of prescription dose distributions for different volume. For example, how about the dose for liver lesions which PTV volume more than 500ml, which got similar excellent LC as the small tumor.
5. The definition of unresectable is not really unresectable, because most patients only have one metastasis lesion, and the mean age is 68 (not too aged), the most important factor maybe that the operation could not have the patients get curative treatment results for most of the patients will have new mets disease in the future, while SABR could provide similar LC compare operation with less damage to the patients body. For example, the lung lesion in figure 1 could be easily resected.
6. I suggest do further analysis tumor special-survival and draw the survival curve.