Author’s response to reviews

Title: CXCR4 expression on circulating pan-cytokeratin positive cells is associated with survival in patients with advanced non-small cell lung cancer

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Version: 7 Date: 21 May 2009

Author’s response to reviews:

May 5, 2009

BioMed Central Cancer

Re: Revised Manuscript—CXCR4 expression on circulating pan-cytokeratin positive cells is associated with survival in patients with advanced non-small cell lung cancer

Dear Editor:

We would like to thank the reviewers for their insightful comments on our manuscript, “CXCR4 expression on circulating pan-cytokeratin positive cells is associated with survival in patients with advanced non-small cell lung cancer.” The manuscript has been thoroughly revised in accord with the reviewers’ suggestions. Please find below point-by-point responses to each of the reviewers concerns. The modifications are formatted to display the reviewer’s comment first followed by the revision. The revised manuscript has been reviewed and approved by all of the authors, and as such, submitted for your timely review.

Reviewer 3:

1. In the Results (Patient Characteristics) and Table 1, the authors should show more classified stage of all NSCLC patients. They presented the data of stage IIIB and IV, however, it is insufficient. Table 1 only showed characteristics of biased subgroup.

   Table 1 has been updated to include all lung cancer patients analyzed.

2. In the Results (CXCR4 and Pan-cytokeratin Expression in Peripheral Blood), the authors described “CXCR4 and pan-cytokeratin expression was elevated on circulating cells of patients with NSCLC. We found both pan-cytokeratin expression and combined pan-cytokeratin/CXCR4 expression was significantly increased on PBMC of patients with advanced NSCLC when compared to normal
controls.” The authors need to perform statistical calculations including all NSCLC cases (28 cases) in spite of advanced NSCLC cases (13 cases) only. All NSCLC cases can be divided into subgroup. Because the small number of cases in this study probably means without the assumption of equality of variances, nonparametric tests, e.g., Mann-Whitney U test or Kruskal-Wallis test, should be performed to compare 2 or more group.

Data was available on 16 lung cancer patients and 10 normal subjects. The original 28 patients did not have usable specimens. The final analysis was performed on the full group of lung cancer patients with data available (16 lung cancer and 10 normal). The statistical section has been updated and the figures have been updated. A Kruskal-Wallis test has been performed. A comment that most patients studied had stage III or IV disease was added to the discussion.

3. In the Results (Low Circulating CXCR4 and Pan-cytokeratin Expression Predicts for Improved Survival), univariate survival analysis should be performed on all NSCLC patients in spite of advanced NSCLC patients only. Then, if desired, Kaplan-Meier curves with a log-rank test for subgroup of stage IIIB or IV NSCLC patients can be presented.

The final analysis was performed on the full group of lung cancer patients with data available (16 lung cancer and 10 normal). The statistical section has been updated and the figures have been updated.

Minor Essential Revisions:

1. I can not find “p = 0.034”, described In the Results (Low Circulating CXCR4 and Pan-cytokeratin Expression Predicts for Improved Survival), in Table 1.

The p-value has been updated and added to Table 1 and to the results section.

Thank you for your careful consideration of this revised manuscript for publication in BioMed Central Cancer.

Sincerely,

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