Author's response to reviews

Title: External validation of risk classification in patients with docetaxel-treated castration-resistant prostate cancer

Authors:

Kazuhiko Nakano (nknkzhk@jichi.ac.jp)
Kenji Komatsu (komatsu@jichi.ac.jp)
Taro Kubo (t.kubo@jichi.ac.jp)
Shinsuke Natsui (natsui@jichi.ac.jp)
Akinori Nukui (nukui@jichi.ac.jp)
Shinsuke Kurokawa (s-kuro@jichi.ac.jp)
Minoru Kobayashi (minoruk@jichi.ac.jp)
Tatsuo Morita (moritatu@jichi.ac.jp)

Version: 4
Date: 29 March 2014

Author's response to reviews: see over
We thank again both referees and the editorial team for their comments. We have revised the manuscript according to the referee 2 critique. The revised phrases and sentences that were suggested by referees 2 are highlighted in green.

Responses to referee 1

Reviewer's report:
Authors have addressed all concerns.

We would like to thank you for your peer-review.

Responses to referee 2

Reviewer's report:
I approve of the revisions in this revised manuscript. Please ask the authors to double check the PSA decline proportions in each ARC risk category as it does not make much sense for the good risk group to have an inferior PSA decline rate given their excellent prognosis. Otherwise acceptable.

As you indicated, we double-checked the PSA decline proportions in each ARC risk category; however, we did not have a major error in registered data and statistical analysis.

As a result, there were no statistically significant differences in PSA response between the ARC risk groups. This result was considered to be caused by the reason that most of CRPC patients in the validation group had a history of EMP use; the frequency of a history of EMP use was high in good-risk group (92%) compared to intermediate-risk (82%) and poor-risk (80%) groups.

Thus, we have added that information in the Results-Patients section, and corrected the sentences in the second paragraph of the Discussion section and in the Conclusion section.