Reviewer's report

Title: EphA4 is a prognostic factor in gastric cancer

Version: 2 Date: 13 January 2013

Reviewer: Haruhiko Sugimura

Reviewer's report:

Major Point
1. Antibodies used in this study should be with more detailed information including catalogue numbers. Santacruz usually provide immunogen peptide for absorption test and the authors are recommended to do as in the work by Nakamura R et al.(they cited). Validity of EFNA1 IHC have been sometimes difficult to demonstrate to my experience till a few years ago. Please provide the positive control of EFNA1 or address this point. Especially the readers would be interested in the specificity of the immunoreactivity of EPHA2 and EPHA4, because in some of biological settings those may play in the same context and should discriminate (Tanaka M, Ohashi R et al, EMBO J 2004 23(5): 1075-1088).

2. Define and correlate 0,1,2,3 of IHC staining strength and 0,1,2,3 of staining area in the method section to high expression in the result section. Show examples of each representative composite score.

Minor Comments:
1. The author showed only strongly stained picture. Show the pictures having various scores and impress the readers on the heterogeneity (if there are). They are all 3+, aren't they?
2. EPHA2 is degraded by Cbl by EFNA1 binding (Wang YJ, Ota S wt al. Biochem Biophys Res Commun. 2002 Aug 9;296(1):214-20.) and Table 1 looks strange and interesting.
3. Two categorizations T1+T2 vs T3 +T4, T1+T2+T3 vs T4 was done. It is not clear why they did this arbitrary analysis differently.
4. Discussion on mechanistic story could be shortened.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
The authors investigated EPHA2, EPHA4, EFNA1 as prognostic markers immunohistochemically.

1. Is the question posed by the authors well defined?
Yes

2. Are the methods appropriate and well described?
Some part is missing.

3. Are the data sound?
Most of them

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Yes.

5. Are the discussion and conclusions well balanced and adequately supported by the data?
Mostly yes.

6. Are limitations of the work clearly stated?
No.

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
Responsibility of pathological data is unclear.

8. Do the title and abstract accurately convey what has been found?
Yes.

9. Is the writing acceptable?
Yes.