**Author's response to reviews**

**Title:** Poor prognosis of single hormone receptor- positive breast cancer: Similar outcome as triple-negative breast cancer

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**Author's response to reviews:** see over
Response to the concerns-Cover letter

Thank you to your review and comments. Based on the advice received, we submit the revised manuscript and a list of responses to the comments.

Revisions:

#1. In the Abstract lines 14 to 20 should be revised from:

Our multivariate analysis showed that ER+PR- tumors in patients without HER2 overexpression were associated with an increased risk of survival compared with ER+PR+ tumors, with a hazard ratio of 2.12 for disease-free survival (DFS) and 4.79 for overall survival (OS). And ER-PR+ tumors had increased risk of recurrence and death compared with ER+PR+ tumor, with a hazard ratio of 4.19 for DFS and 7.22 for OS. The DFS and OS of ER+PR- tumors and ER-PR+ tumors were not significantly different from those of ER-PR- tumors. In patients with HER2 overexpression, the difference in survival between single HR+ tumors and double HR+ HR- tumors was also not statistically significant.

to:

Our multivariate analysis showed that in patients without HER2 overexpression ER+PR- tumors were associated with an increased risk of recurrence and death compared with ER+PR+ tumors, with a hazard ratio of 2.12 for disease-free survival (DFS) and 4.79 for overall survival (OS). In patients without HER2 overexpression ER-PR+ tumors had increased risk of recurrence and death compared with ER+PR+ tumor, with a hazard ratio of 4.19 for DFS and 7.22 for OS. In contrast, in patients with HER2 overexpression, the difference in survival between single HR+ tumors and double HR+ HR- tumors was not statistically significant. In patients without HER2 overexpression the DFS and OS of ER+PR- and ER-PR+ tumors were not significantly different from those of ER-PR- tumors.

#2. Page 8, lines 16-19: please modify from:

Therefore, we stratified our cases according to HER2 overexpression and we found that differences in clinicopathologic characteristics decreased and were not significantly different between the four subgroups (ER+PR+, ER-PR+, ER-PR- and ER+PR-) in patients with HER2 overexpression. In addition, there was no difference in survival between these subgroups.

to:

Therefore, we stratified our cases according to HER2 overexpression and we found that differences in clinicopathologic characteristics were not significantly different between the four subgroups (ER+PR+, ER-PR+, ER-PR- and ER+PR-) in patients with HER2 overexpression. In addition, there was no difference in survival between these four subgroups.

#3 Page 9, the lines 11-18 were eliminated.

#4 (Acknowledgements) Page 12, the line 9-10 were changed: from Republic of Korea (HI09C1552) to Republic of Korea (HI14C3418).
Sincerely,

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