Author's response to reviews

Title: High SLFN11 expression predicts better survival for patients with KRAS exon 2 wild type colorectal cancer after treated with adjuvant oxaliplatin-based treatment

Authors:

Yanhong Deng Dr (dengyanh@mail.sysu.edu.cn)
Yue Cai (chilly8518@163.com)
Yan Huang (huangyanyanhuang@163.com)
Zihuan Yang (yzhuan@mail.sysu.edu.cn)
Yang Bai (Baiyanggz@163.com)
Yanlu Liu (liuyanluguo@126.com)
Xiuping Deng (xiuping63@126.com)
Jianping Wang (wangjpgz@126.com)

Version: 2 Date: 24 March 2015

Author's response to reviews: see over
Dear Editors,

Thanks for giving the second opportunity to consider our manuscript in BMC Cancer. Please find enclosed the manuscript entitled “High SLFN11 expression predicts better survival for patients with KRAS exon 2 wild type after treated with adjuvant oxaliplatin-based treatment”, which we would like to submit again for publication as an Original Article in BMC Cancer. The previous manuscript ID was 2207888115035312.

The manuscript was first submitted to BMC cancer on Nov 2014. After first peer review, two reviewers have given valuable comments and suggestions for the current manuscript. We’ve addressed most of the concerns and we’ve revised the manuscript accordingly. However, only one point about KRAS obsolete was not fully addressed. The manuscript was returned to the authors.

With the new version, the issue was addressed please find the details below.

We confirm that this manuscript has not been published elsewhere and is not under consideration by another journal. All authors have approved the manuscript and agree with submission to BMC Cancer.

Please address all correspondence to:
Yanhong Deng
Department of Medical Oncology, Gastrointestinal Hospital, Sun Yat-sen University
26 Yuancun Er Heng Road, Guangzhou, Guangdong, 510655
Phone: 86-020-38254084
Fax: 86-020-38254084
Email: dengyanh@mail.sysu.edu.cn

We look forward to hearing from you at your earliest convenience.

Yours sincerely,
Yanhong Deng
Authors conclude that SLFN11 expression predicts good better survival in patients with KRAS wild type, I enjoy the implication of this result, however, the definition of KRAS patients is obsolete. More recently, additional RAS mutations (NRAS or BRAF mutation status) defines the “RAS” status. Authors should revise their in the light of this issue.

**Response:** Thanks for the reviewer’s suggestion. In the new version, in order to be more precise, we confined KRAS wild type to be specifically KRAS exon 2 wild type throughout the manuscript from title to discussion. In addition, we’ve put limitation to the end of the discussion highlighting the issue. With regards to NRAS and BRAF, we’ve done NRAS and BRAF mutation test in KRAS exon 2 wild type patients, 10 and 3 patients were identified as mutation respectively. The results remained the same after exclude the 13 patients. The sentence was added to section of “Results”.