Author's response to reviews

Title: The performance of NLST screening criteria in Asian-American lung cancer patients

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

I am pleased to submit this original research titled, “Performance of NLST criteria for screening of lung cancer in Asian-American Patients” to your prestigious, ‘BMC Cancer’. Each author has contributed to prepare the manuscript and meet the International Committee of Medical Journal Editors (ICMJE) criteria for authorship. This manuscript is our original work and its contents have not been published, in whole or in part, prior to or simultaneous with this submission. None of the authors have any interest to disclose. This study was approved by IRB of Maimonides Medical Center.

The incidence of lung cancer is trending down in United States but continues to grow in Asia. Until recently none of the screening study could show any mortality benefit. However National Lung Screening Trial (NLST) revealed mortality benefit with low dose CT in a very controlled setting. The extension of these criteria to population with risk factors different from original study population is debatable and unclear. The NLST criteria for screening of lung cancer have been criticized for their strictness. Only 28% of already diagnosed lung cancer patients in United States would meet the criteria for screening. Thus it was interesting to study their performance in Asian population who unlike America patients are younger and never smokers with higher prevalence of EGFR mutations. This was a retrospective study on already diagnosed Asian-American lung cancer patients. This paper provides the first clinical data on the validity of extrapolation of NLST criteria to Asian population. The other exclusive feature is the characteristics of screening ineligible patients which have not been described elsewhere. This study merits publication because besides being the first study on the performance of NLST criteria in Asians, it also revealed the characteristics of screening ineligible population which
may be useful to plan screening studies in the future for these unfortunate subjects who are currently ineligible for screening by virtue of being non-smokers or young age.

We are thankful to you for taking your time out to go through this manuscript. As per your suggestions, we have made the necessary changes and reloaded the manuscript. The study was IRB approved and highlighted in material and methods section

I am thankful to you and your team for your efforts and time in reviewing this submission. Please feel free to contact me for any question.

Thanks

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