Author’s response to reviews

Title: Eukaryotic Elongation Factor-2 Kinase Expression is an Independent Prognostic Factor in Colorectal Cancer

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Author’s response to reviews:

Jean-Philippe Brosseau, PhD
Handling Editor
BMC Cancer

12th June 2019

Dear Dr Brosseau,

RE: Your submission to BMC Cancer - BCAN-D-19-00327R2

Thank you for giving us another chance to revise our manuscript. Below is the comment from reviewer, followed by our responses and additions to the manuscript. Changes to the manuscript


in response to comments are highlighted in yellow in the text of our revised paper to facilitate your review.

We believe that your comments and those from the reviewers have improved our manuscript. We sincerely hope that you feel our manuscript worthy of publishing. All authors have seen and approved the final manuscript submitted.

Yours Sincerely,

Christopher H.K. Cheng and William K.K. Wu, on behalf of all co-authors

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Reviewer reports and responses

Zhang Xiaoli (Reviewer 1): Thank the authors for answering all my questions/comments. However, how they picked the patients from the TCGA data to show that reduced EEF2 expression is correlated with worse patient survival is very fishing as they only picked the patient group that were at stage IV with top and bottom 20% of EEF2 expression. If they adjust for multiple comparisons after testing so many different groups, i.e., different tumor stages (only stage IV was used), different cutoff for EEF2 dichomotization (high vs. low expression), the p-value for the survival analysis may not be significant anymore. The authors did discuss that the patient cohort in the TCGA group is different from the patient group that they used in terms of patient genetic background, is it possible to just use the Asian patient cohort in the TCGA data to support your finding?

Responses: We admitted that multiple comparison was not adjusted when assessing the significance level in this analysis. We also understand the concerns raised by the reviewer. This shortage is explicitly mentioned and discussed in the revised manuscript (page 17, line 302-304). As for the analysis using Asian patient only in the TCGA cohort, there are only 12 cases are Asian, in which 10 of the cases are censored in about one year. It is a pity that the sample size is too small to provide insightful information.