**Author’s response to reviews**

**Title:** The long-term efficacy of one-shot neoadjuvant intra-arterial chemotherapy combined with radical cystectomy versus radical cystectomy alone for bladder cancer: a propensity-score matching study

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**Author’s response to reviews:**

Homayoun Zargar
Editor
BMC Urology

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Dear Editor,

Re: Manuscript reference No. BURO-D-19-00302R2
On behalf of my coauthors, I thank you very much for giving us an opportunity to revise our manuscript. We appreciate the reviewers’ positive and constructive comments on our manuscript entitled “The long-term efficacy of one-shot neoadjuvant intra-arterial chemotherapy combined with radical cystectomy versus radical cystectomy alone for bladder cancer: a propensity-score matching study”, which we would like to resubmit for publication as an original article in BMC Urology.

Your comments and those of the reviewers were highly insightful and enabled us to greatly improve the quality of our manuscript. We have studied the reviewers’ comments carefully and have made revisions, which are marked in red in the manuscript. In the following pages are our point-by-point responses to each of the comments of the reviewers, as well as to your own comments. We hope that the revisions in the manuscript and our accompanying responses will be sufficient to meet the expectations for publication in BMC Urology.

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

Yours sincerely,

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Responses to the comments
Reviewer 2:
1. The authors state the low mortality rate in their cohort is due to patient selection (highly selected cohort, young and healthy). The risk of selection bias, hence, should be highlighted as a limitation of the study.
Response: Thank you for this very good reminder. We have added this limitation in the last paragraph of the "Discussion" section.

2. Thanks for replying to my comment regarding the propensity score matching. Although the final pathology shows no difference between the cohorts, I believe the PSM has not truly resulted in 2 balanced cohorts for comparison. It is possible that NIAC cohort had lower stage disease to begin with.
Response: The reviewers’ words were reasonable. We have added this limitation in the last paragraph of the "Discussion" section.

We appreciate the Editor’s and Reviewers’ thorough review and comments on our work, and we hope that the corrections will meet with your approval. Once again, thank you very much for your comments and suggestions.