Author's response to reviews

Title: Using surveillance data to understand the features of cancer: An overview from Morocco

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Author's response to reviews: see over
### Paper: Surveillance data and features of cancer: an overview in Morocco

#### Answers of the reviewers comments

<table>
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<th>Questions to be reviewed</th>
<th>Answer</th>
<th>Paragraph, Page</th>
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<tr>
<td><strong>1. Is the question posed by the authors new and well defined?</strong></td>
<td>“to identify existing sources of cancer surveillance data in Morocco which would benefit cancer prevention and control strategies” It seems that objectives was not to identify sources but to use data of these sources to describe cancer mortality and incidence trends in Morocco. Please reformulate the objectives, such as: “to use data from the two national registers in order to…”</td>
<td>Objective has been modified according to the reviewer’s suggestion.</td>
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**2. Are the methods appropriate and well described, and are sufficient details provided to replicate the work?**  
You present three sources of data: Registries of Casablanca and Rabat and the GLOBOCAN. However, results from the GLOBOCAN is based on data coming from the two others sources (the national ones), it doesn’t include “original” features.  
As the objective is to “identify sources” we would have excepted other “original sources”, such as hospitals or clinics in remote areas, or more local labs, etc.  
Are these two registries representative? You mention that they cover (12% + 2%) of cancer patients in the country… in two big cities… Any consideration on that?  
Besides, the explanation on how data are collected by these two registers is not clear at the moment.  
“The data collection is made in a retrospective way by studying patient cases in various private and public care structures”  
What are the patient cases? Do you mean files? Electronic files?  
What do you mean by “studying cases”? | GLOBOCAN present some modelisation of projections of expecting deaths and new cases in still 2035.  
The objective has been changed.  
The other sources (such as hospitals or clinics in remote areas, or more local labs) are not reliable for national data surveillance of cancer in Morocco.  
Around the world and in many countries the only existing cancer registries are population based ones.  
These two registries are representative of the two big regions of Morocco.  
The explanation of data collection process and what are the patient cases were reformulated and reviewed in the document. | Paragraph 4, page 4 and Paragraph 1, page 5 |

**3. Are the data sound and well controlled?**  
Could be… but it is difficult to assess the reliability of the data from the two registries (we miss the description of the data collection and their representativity (only patients from Rabat and Casbalanca). | The description of the data collection was reviewed before  
More explanation about the representativity was raised in the discussion | Paragraph 4, page 4  
Paragraph 5, page 8 |

**4. Does the manuscript adhere to the relevant standards for reporting and data deposition?**  
Objectives and results need to be refined (better described). | Objectives were reviewed and are better understood in the document. |

**5. Are the discussion and conclusions well balanced and adequately supported by the data?**  
In the discussion, authors state that they notice a slight improvement in cancer incidence and that this could be due to a one year “awareness-raising program” organized in 2006-2007. This is very unlikely… this could have impacted the mortality rates (people more aware of screening) but not the incidence. Moreover, the dates of the decrease (2005-2007) do not coincide with the dates of the program (2006-2007). | This paragraph has been removed after reviewing this part in the discussion section. | Paragraph 5, page 9 and Paragraph 5, page 10 |

**6. Do the title and abstract accurately convey what has been found?**
The title and objectives promised to focus on (1) registers and (2) cancer prevention strategies and the great majority of the results present/discuss the incidence and mortality rates. This paper appears much more (and should be) a clear advocacy for better cancer registration before being able to calculate any rates and propose cancer control strategy. Cancer prevention is very much related to lifestyles that need to be screened and studied to allow the recommendations of strategies.

Abstract has been reviewed according the document reviewed and the objectives and results were correctly adjusted.

7. **Is the writing acceptable?**

An English editing would be of added-value. Document was reviewed by English native person. All the document