



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	Ms_JCTI_29776
Title of the Manuscript:	RADIO-INDUCED SARCOMAS
New Title:	RADIATION - INDUCED SARCOMA: A CASE REPORT”
Type of Article:	Case study

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
“the risk of developing a sarcoma of the soft tissue is zero without irradiation and reached 880 after radiotherapy. The risk of bone sarcoma as for him is 270 without irradiation and 630 after irradiation” The above measures of risk need to be clarified (ie. What do 270, 630, and 880 mean?) Please see the multiple edits on the manuscript. “Finally, neutrons in place of photons would significantly increase the incidence.” The above should be expanded upon, it is not clear. “On the other hand, in a large series from the Institut Curie, the histological types were dominated by angiosarcomas in 48% of cases [8] relating to 67 patients [this sentence is not clear], the initial 34 were treated by radiotherapy for breast cancer, leiomyosarcoma was the most common histological type [this sentence also doesn't follow from the previous, needs clarification]” Also, needs to be clarified. Under Latency Period; this section should begin by a definition of the latency period. An estimated five year survival in 36% of cases [8] and a survival around 33.1 months [is this a median/mean survival estimate? It isn't clear...] [10], and after an average interval of 12.8 months [what does this average interval mean? Death occurs after this period?]” See above needed clarifications. Under Prognosis, expand on the following: “Survival would seem independent to histological type” I suggest switching the sections on Treatment and Prognosis, so that	This is the risk of occurrence of radiation induced sarcoma in patients with bilateral retinoblastoma The use of neutrons could pose problems of secondary cancers. A study was conducted by MacDougall and al. of 620 patients treated with neutrons for different tumors between 1977 and 1984 [41]. During long-term follow-up, they observed three cases of sarcomas in the irradiated volume. It was a high-grade fibrosarcoma and two high-grade leiomyosarcomas respectively, six, 16 and 20 years after the initial treatment. The incidence was 111 times that of the normal population and, 15 times that of a comparable population treated by photons. On the other hand, in a large series from the Institut Curie, the histological types were dominated by angiosarcomas in 48% of cases [8] and in a retrospective study of 67 patients among which 34 beforehand treated by radiotherapy for breast cancer, leiomyosarcoma was the most frequent histological type [9]. Is the time between irradiation and the occurrence of radiation induced sarcoma The prognosis of this condition is poor with an estimated five years survival in 36% of cases [8] and a mean survival estimate 33.1 months [10]. Recurrences were observed in 77% of cases, and after a median interval of 12.8 months [11]. The most predictive factor of recurrences remains the size of the sarcomatous tumor at the time of diagnosis [4]; the histological type does not seem to affect; neither the rate of recurrence, neither survival [5].



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prognosis is the last section.

The change was made