

Peer Review File

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Reviewer 1

Succinct review to summarize existing data in chemo-radiation. However, authors incorrectly state several times there is data to support radiation in locally advanced gastric cancer. The only possible indication is if patients received gastrectomy with D1 dissection, which is no longer the standard of care. Most people receive D2 dissection today. Neoadjuvant chemo-radiation is reserved for esophageal cancer and GE junction cancer, NOT gastric cancer. Your conclusions in abstract, intro, and discussion are inconsistent with the studies you discussed.

=>Please remove all language that says neoadjuvant chemo-radiation improves survival/outcomes in gastric cancer (only GE junction). You could perhaps say more research could be done to see if the benefit seen in esophageal cancer could translate into benefit in gastric cancer.

Reply: all corrections in the text have been made

Reviewer 2

Radiotherapy in gastric cancer: does it still play a significant role?

In this study to explore if radiotherapy is becoming progressively approved as the better multidisciplinary treatment for gastric cancer. Patients with gastric cancer could take advantage from preoperative and postoperative radiotherapy, especially in combination with chemotherapy. Overall, this manuscript is well designed and studied. Some suggestions for this paper are as follows:

Detailed comments to the author

1. The limitations of the work and its interpretation are not discussed.
2. The current study needs to compare and discuss with their study.

Reply: I modified conclusions based on suggestions of reviewers