

AUTHOR'S REPLY

We would like to thank Wai CT⁽¹⁾ for the interest and comments on our article.⁽²⁾

We are familiar with the National Comprehensive Cancer Network (NCCN) guidelines and recommendations given by the American Association of Study of Liver Diseases (AASLD). However, we are also aware that the aetiological factors leading to hepatocellular carcinoma in Western populations are markedly different from our local context,⁽³⁾ and thus, there is a need to review the relevance of alpha-foetoprotein (AFP) in surveillance of post-treatment recurrence. Furthermore, as rightly outlined by the author, there exists a conflict between the recommendation given by NCCN with regard to the use of AFP in patients with elevated level pre-surgery and that given by AASLD, which mandates our verification of the recommendations.

It was suggested that the study should limit the analysis among those with elevated pre-treatment AFP. However, as demonstrated in this study, the term 'elevated' remains evasive to definition since even the upper limit of our laboratory's 'normal' range had a poor sensitivity of only 62.5%.

Yours sincerely,

Stephen Chang Kin Yong

Department of Surgery, National University Hospital, 5 Lower Kent Ridge Road, Singapore 119074. cfscky@nus.edu.sg

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