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Reply

To the Editor—We thank Drs. Abdalla and Aref for their careful attention to our article and their commentary on factors influencing rectal cancer clinical complete response.

First, we agree short-course radiation alone is likely not the dominant factor driving the higher downstaging associated with total neoadjuvant therapy (TNT) compared with chemoradiation. Instead, the consolidation chemotherapy and prolonged time interval to restaging included in TNT probably account for this observed effect. Therefore, we specifically concluded that a TNT approach utilizing short-course radiotherapy was associated with greater downstaging than chemoradiation alone; we made no claim that short-course radiation was the causative factor.

Over the past 5 years, TNT of varied forms has become generally accepted as excellent treatment for locally

advanced rectal cancer. However, ultimately, it remains unknown whether chemoradiation's added time and substantial costs improve long-term outcomes over short-course radiotherapy within a universal TNT framework. In other words, is TNT incorporating chemoradiation worth the price, or do alternatives such as short-course TNT best balance oncologic effect and resource consumption? We eagerly await that answer.

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