

April 28, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 10276-review.doc).

Title: Surgical management of colonic diverticular disease: Discrepancy between right-sided and left-sided disease

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Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 10276

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

(1) Reviewer 02727993

Comment 1 Discussion: "Our study confirmed that the incidence of diverticulosis, particularly that of left-sided diverticulosis, is increasing in Korea. " This study included only patients that had been operated for diverticular disease. This conclusion is not accurate since there must have been patients that were treated conservatively. Comment 2 What type of diverticulae did your patients with right side diverticulosis and bleeding have- true or false? Comment 3 Discussion "The reasons for the poorer prognosis are hypothesized to include a delay in diagnosis due to the uncommon nature of the disease, as well as the progression of disease to a more complicated form." This hypothesis cannot be sustained based on the data presented. Additionally, it is rather strange that in a tertiary hospital the diagnosis of diverticulitis is being delayed.

Response:

Comment 1: The point the reviewer makes is a valid one. Accordingly, we have removed the statement and revised the Discussion section to more clearly state that the results of the present study indicate an increased incidence of diverticulosis.

Comment 2: We thank the reviewer for bringing this to our attention. This was a retrospective study of cohort of consecutive patients, and thus there was limited information concerning the detailed types of diverticulae in the pathologic reports. It is presumed that the right-sided diverticula were congenitally formed true diverticula, similar to other studies.

Comment 3: We thank the reviewer again for the insightful and helpful review of our manuscript. The corresponding statement has been revised to reflect a possible explanation, rather than a hypothesis based on the results of the study.

(2) Reviewer 00040472

The study would read better if duplication of results by excess tables was avoided.

Response:

We thank the reviewer for the helpful suggestion. We have therefore deleted duplicative expressions in the Results section as recommended.

(3) Reviewer 02549250

This is a good retrospective review of surgically treated diverticular disease in a tertiary referral hospital in Korea. The report is fairly comprehensive. A few points are worth mentioning: 1. A comparison is made to a historical series from studies in 1982 and 1990. Unfortunately an important piece of information missing is the total number of patients referred/admitted with diverticulosis to this unit. This information would be helpful in giving the complete picture. Is this information available? 2. The authors hypothesise that the poorer prognosis in the left side diverticular disease (longer post-op stay and higher complication rate) is due to a delay in diagnosis. Data on timing of the operation in each group should be included. 3. Clarification on the surgical approach to the abdomen is required (Open/Laparoscopic).

Response:


Comment 1: We thank the reviewer for their insightful suggestion. However, as the study involved a retrospective cohort, only limited patient information is available concerning patients who underwent operations in our surgical department. As a result, information concerning the total number of patients referred and/or admitted is unavailable, though we agree they would provide useful information.

Comment 2: Thank you for your important review. Our hypothesis cannot be sustained based on the data presented, as we do not have information concerning the time until/delay in patient diagnosis. Therefore, we have amended the corresponding statement to reflect a likely possibly contributing to a poorer prognosis.

Comment 3: During the period in which the patients included in this study were treated, open colectomy was the preferred approach. However, currently a laparoscopic surgery is the preferred technique. As requested, we have included a statement in the methods section indicating that all patients underwent an open colectomy. Additional descriptions of surgical procedures have also been included in the Results section.

I hope these revisions are in accordance with the suggestions made. I will upload the revised version immediately, and I hope you will consider publication of the manuscript.

Sincerely yours,



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