

ANSWERING REVIEWERS

May 31st, 2015

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: 17547-edited.doc).

Title: Rare Gastro-Intestinal Lymphomas: the endoscopic investigation

Author: Calogero Vetro, Giacomo Bonanno, Giorgio Giulietti, Alessandra Romano, Concetta Conticello, Annalisa Chiarenza, Paolo Spina, Francesco Coppolino, Rosario Cunsolo, Francesco Di Raimondo

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 17547

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. Following you will find a point-by-point response to reviewers comment

(1) reviewer 00035938

- a. General comments: Vetro et coworkers present an interesting and comprehensive review on the endoscopic aspects of rare gastrointestinal lymphomas. It is not well structured just listing several features for the different lymphoma.
 - i. To date, no clinical studies have been done regarding rare GI lymphomas and most of our knowledge on these diseases rely on small case series and case reports. However, a comprehensive review on the endoscopic presentation of these disease is still lacking in literature.
- b. Unfortunately, the language/spelling renders the manuscript difficult to read and sometimes difficult to understand. The help of a native English speaker would be desirable.
 - i. Language/spelling has been polished.
- c. Core tip: The second sentence does not make sense
 - i. Core tip has been re-written according to reviewer comments
- d. Specific comments: Introduction: It remains unclear why double balloon enteroscopy should play a role in gastric or colonic lymphoma
 - i. As stated in the manuscript, double balloon enteroscopy would augment the diagnostic field of endoscopy, even if the clinical impact is still under debate.
- e. T-cell and NK lymphomas: Please explain the abbreviations EATL
 - i. Done
- f. The thickening of the respective layers might be a main EUS finding.
 - i. Sections regarding EUS have been extended and we paid attention in describing EUS pattern for each lymphoma subtype and its impact on disease management.
- g. A table listing GI lymphoma with main GI organ involvement and typical presenting characteristics, typical immunophenotype and genotype and prognosis would be helpful
 - i. We inserted a table describing the characteristics mentioned.

- h. Please state more clearly how proper staging should be performed.
 - i. A section related to the staging has been introduced into the introduction.
- i. The conclusion is phrased rather cryptically
 - i. Conclusion has been improved

(2) reviewer 00051235

- a. This review of an unusual topic is appropriately comprehensive, though I echo the comments from other reviewers regarding the syntax errors which make it quite difficult to read. Review of the text with a native English speaker would be helpful.
 - i. As stated above, English has been polished
- b. Despite the title of the manuscript, there is limited description here of the use of CE or deep enteroscopy for evaluation of these lymphomas. Some more information on the yield of these modalities for diagnosis and their roles would be helpful for the intended audience. When referring to double-balloon enteroscopy, it would be most appropriate to use the term "deep enteroscopy," as single balloon and spiral enteroscopy also have a high diagnostic yield for small bowel masses.
 - i. As indicated by this reviewer, we updated information about deep enteroscopy in general and indicated the current state of art on its usage in this lymphoma setting.
- c. The use of EUS is intermittently discussed. I think the role of this modality needs to be clarified by the authors. Given the limited role for surgery in lymphoma, does EUS have any role in staging, or is the information gathered merely useful for describing the behavior of these lesions? (The role of EUS in plasma cell disease is nicely described by the authors, for instance).
 - i. We expanded the section related to EUS usage in the introduction discussing about its role and usefulness
- d. The authors' statement regarding the role of IBD therapies as causative factors in enteropathy-associated T-cell lymphomas is potentially misleading, and likely needs expansion to reflect the breadth of opinions regarding the potential influence of these medications.
 - i. We thank the reviewer for this comment, however the main target of the review is not to investigate the relationship between Crhon's disease and GI lymphoma. However, according to data from literature, we indicated that patients suffering Crhon's disease would have a greater risk to develop a lymphoma and that this risk is not due to received treatment. However, we agree on the fact that in literature no univocal data are present and further efforts are needed to address this question, in terms of both prospective studies and metanalysis.
- e. I would also appreciate some clarification on the indolent T-LPD entity. Is this a monoclonal population or a polyclonal infiltrate?
 - f. Again, we thank the reviewer for this clarification. Monoclonal or polyclonal origin of investigated diseases has been reported in the main text and also in table 2.

(3) reviewer 02543905

- a. I thank the editors for giving me the opportunity of reviewing such a well written article. The paper is focused on a very interesting and emerging issue with an uptodated approach. It is well written, complete and exhaustive and definetely deserves publication after some minor language polishing.
 - i. We, in turn, thank the reviewer for this positive comment. We hope that readers of WJG will also agree on the interest of this study. English has been polished.

3 References and typesetting were corrected

4 Authors believe that the language of the manuscript has reached grade A.

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Calogero Vetro'. The signature is fluid and cursive, with the first name 'Calogero' written in a more stylized, elongated script, and the last name 'Vetro' in a more compact, bold script.

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