

Format for ANSWERING REVIEWERS



June 20, 2015

Title: Management of afferent loop obstruction: Reoperation or endoscopic and percutaneous interventions?

Authors List: Konstantinos Blouhos, Konstantinos Andreas Boulas, Konstantinos Tsalis and Anestis Hatzigeorgiadis

Name of Journal: World Journal of Gastrointestinal Surgery

ESPS Manuscript NO: 17819

Dear Editor,

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

1. Format has been updated.
2. Revisions have been made according to the suggestions of the reviewers.

(1) **Reviewer 1** (2445426)

Comments: In general, this is an interesting review paper with unique originality. The article is well-organized and includes useful information on this rare clinical condition. Only suggestion is that the paper needs minor language polishing and should include proper references in discussion.

Reply: Writing language was further edited and more references were included in the discussion section. However, the literature regarding management of afferent loop obstruction is limited and mainly consisted of small case series and isolated case reports.

(2) **Reviewer 2** (2445518)

Comments: The invited review Afferent loop obstruction: Reoperation or endoscopic and percutaneous interventions? By Blouhos K, is an interesting good review well organized on a particular and rare complication. Few studies have been written on this item generally presenting

case report or small group of patients. Minor suggestion: 4' line from the bottom in abstract, in the, must be removed 1 of the 2 time. The only advice I may suggest, regards the 2 presented tables were is not evident if authors suggestions or literature data, are reported. If indication for management, as I suppose, are suggestion from literature, all reference must be inserted to better identify relative studies.

Reply: The suggested minor grammar changes were made and references were added in the presented tables.

(3) **Reviewer 3** (4485)

Comments: This manuscript addresses the diagnosis and therapeutic options in patients who develop afferent limb syndrome after respective or bypass therapy. 1. Minor grammar suggestions: a. Imaging studies paragraph 3, line 2 = when a pancreaticoduodenectomy has been done. b. Management, paragraph 1, line 18/19 = in the setting of a prior pancreaticoduodenectomy... c. Management, paragraph 2, line 1/2 = As mentioned above... In contrast, palliative approaches... d. Paragraph 2, line 11 = In the Pannala series... 2. Please add balloon dilation of an afferent limb caused by anastomotic ulcer. This has been well described and is the usual way this is treated in the reviewer's institution in addition to ulcer healing with PPIs. Would add this both to the text and Table 1. 3. In the Management section, the authors discuss treatment of an afferent limb can be accomplished by placing pancreaticobiliary stents if these anastomoses are stenosed after a Whipple. Please clarify that this will work only if the proximal portion of the stent is downstream from the area of afferent limb obstruction.

Reply: The suggested minor grammar changes were made. Endoscopic balloon dilation has been added as a management strategy of afferent loop obstruction caused by an anastomotic stenosis at the gastrojejunostomy or jejunojejunostomy site. Endoscopic or transhepatic percutaneous stent placement traversing the stenotic area for management of malignant afferent loop obstruction was further clarified in the management section of the manuscript.

3. References and typesetting were corrected.

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

Sincerely yours,

A handwritten signature in black ink, appearing to read 'K. Boulas', enclosed within a hand-drawn rectangular box.

Konstantinos A. Boulas, MD, MSc Department of General Surgery, General Hospital of Drama End of Hippokratous Street, 66100 Drama, Greece Tel: +306937265675 Fax: +302513501559 E-mail: katerinantwna@hotmail.com