Response letter

The reviewers gave out 3 comments to my manuscript 19601. I have revised my manuscript according to these comments, and here I give response addressing each of the points.

1. Authors presented 3 kinds of methods for the pain control after open gastrectomy (CWI, epidural and PCIA) as well as some anesthetics such as propofol (2mg/kg), sufentanil (1ug/kg) and cisatracurium (0.15mg/kg). Authors should show the references to validate these methods or drugs for the managements of pain control in patients with open gastrectomy.

For this comment, I want to clarify that propofol, sufentanil and cisatracurium are the agents to perform anesthetic induction for tracheal intubation. Propofol provides sedation, cisatracurium is a kind of neuromuscular blocks. Neither of them has analgesic effect. Sufentanil is a kind of opiods which can provide analgesia, and opiods are necessary for tracheal intubation and surgery. The eliminate half-time of sufentanil is 240min when the dose reach 250ug, which if far more than the dose in our study. Even the analgesia of sufentanil was residual at the end of surgery, it won't cause deviation of the results, since every patient adopt the same dosage of sufentanil (1ug/kg).

PCIA and epidural analgesia have been used in clinical for postoperative pain management for many years, and these two ways are considered as routine analgesic methods widely. In the past years many researches proved the analgesic effectiveness and safety for these two methods. I have added references about the two methods for pain managements after open gastrectomy. However CWI is a relative new technique for pain management after surgery, articles of CWI in open abdominal operation have been mentioned in our manuscript, but no study was found in open gastrectomy.

2. Authors had better add the causes of open gastrectomy.

It's a good advice. The causes of disease are related with the extent of surgical trauma and stress which will affect the pain evaluation. So we verified the pathological results of all the patients and added to the Table 1.

3. Please use the analysis of variance (ANOVA) or Kruskal-Wallis test to evaluate the statistical significance for continuous variables (Table1 and 2).

We have redone the statistical tests using ANOVA for the continuous variables in Table 1 and Table. And the results was revised.