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22nd March 2016.

The Editor
World Journal Clinical Cases

Dear Sir/Madam,

RE: COLITIS CYSTICA PROFUNDA OF THE RECTUM: AN UNEXPECTED OPERATIVE FINDING

We would like to thank the editor and the reviewers for taking their time for a comprehensive review and their greatly valued comments and suggestions. We wish to resubmit this paper to the World Journal of Clinical Cases following revision. The paper has been revised by addressing the comments, suggestions and recommendations of the editor and the reviewers. These issues are addressed point by point and the changes made to the paper are highlighted in blue in the main text.

1. The historical context of the subject has now been removed from the abstract section.
2. The other key words listed were included as mentioned in the text either as associated with this entity or as a differential diagnosis.
3. The multiple rectal polyps seen in the outpatient clinic on rigid sigmoidoscopy were the ones whose biopsies at flexible sigmoidoscopy confirmed benign hyperplastic polyp on histology. The

larger 3 cm one seen in the clinic turned out to be the described colitis cystica profunda.

4. Rectocele and rectal mucosal prolapse in page 5 were findings at the time of the examination under anaesthesia. Association of rectal prolapse has been previously reported with localised CCP in up to 54% of cases as indicated in the literature review. However, it is difficult to ascertain whether there was a causal relationship between the two in this case. The sentence has been revised to avoid confusion.
5. Degenerate calcification has been changed to dystrophic calcification.
6. The histologic description has been appropriately revised as suggested.
7. The overlying mucosa over the lesion shows some degree of benign hyperplasia.
8. The differential diagnoses of inverted or pseudo-invasion of adenomatous polyp of the rectum have been added to the text.
9. Unfortunately we do not have a better endoscopic picture.
10. Telephone and fax numbers have been added to the corresponding author's contact details with the country codes.
11. Audio of core tip has been made.
12. Comments have been added to the manuscript.
13. PubMed and DOI citation numbers have been added to the reference list.

Other areas of suggestions and recommendations have been addressed in the text and appropriately highlighted.

We look forward to your comments

Kind regards

Mr AA Ayantunde

Dr C Strauss

Dr M Sivakkolunthu

Dr Anu Malhotra