

Division of Digestive Diseases

Emory University School of Medicine

July 2, 2016

ESPS Manuscript NO: 27147

Dear Professor Herrerias Gutierrez and Professor Imagawa,

Thank you for the provisional acceptance for our manuscript entitled "Same site submucosal tunneling for a repeat peroral endoscopic myotomy: A safe and feasible option" in the World Journal of Gastrointestinal Endoscopy (WJGE). We also appreciate the reviewer's insightful comments.

Kindly find attached to this letter a point by point response to the reviewer's comments, as well as a revised manuscript in which changes were highlighted in yellow.

Thank you for considering our manuscript for publication in your esteemed journal.

Sincerely,

Qiang Cai, MD, PhD, FASGE, FACG

Professor of Medicine

Director, Advanced Endoscopy Fellowship

Division of Digestive Diseases

Emory University School of Medicine

Response to the Reviewer

We would like to thank the Reviewer for their comments.

1. The patient had a history of GERD, as GERD is a complication of POEM, did POEM have an influence on her GERD? Or did you make some modification for POEM procedure due to an existed GERD, e.g., a shorter myotomy?

We agree with the reviewer that this is an important consideration. We performed the POEM procedure according to the standard way in our institution, without modification. Her reflux symptoms remained stable while on the same dose of proton pump inhibitor (PPI). The myotomy length and the effect of the procedure on GERD symptoms were further clarified in the first paragraph on page 5.

2. It would be better if you provide the image of barium esophagography.

A post-procedure gastrograffin swallow study was added in the manuscript as shown in **Figure 2**. It showed a grossly distended esophagus consistent with achalasia, and postoperative edema with slow emptying at the gastroesophageal junction. There was no evidence of contrast leakage. These findings were described in further detail in the 2nd paragraph, page 4.

3. An image showing the esophagus mucosa before the repeated POEM is recommended, as it would provide the impression of the mucosa that has no submucosal fibrosis due to previous therapy, which helps the reader to distinguish those with submucosal fibrosis.

We have included a new image in the manuscript (**Figure 3c**), as suggested by the reviewer. The image is now referenced in paragraph 1 page 5.

4. It would be better the author provide more pictures about repeated POEM procedure, more better if a video is provided.

We have changed the figures in the manuscript. **Figure 1** now includes 6 pictures about the index POEM procedure. **Figure 3** has 9 pictures about the repeated POEM. We also added another image (**Figure 4**) to provide comparison between the submucosal tunnel of the index POEM and that of the repeated POEM. Figures 3 and 4 are now referenced in the first paragraph on page 5. The above mentioned figures are all included in the revised manuscript. A video of the procedure is not available.