

Dear Reviewers,

Thank you for the critical review of our invited manuscript number 28491, entitled "Endoscopic ultrasound-guided techniques for diagnosing pancreatic mass lesions: can we do better?" We have addressed the reviewer's comments below in bold.

1. In particular are published prospective study using fenestrated needle in cystic lesions and small lesions.

We appreciate the positive comments about the paper, and agree with the first reviewer that the paper will serve to review the topic of EUS of pancreatic mass lesions, rather than that of pancreatic cystic lesions. A review including pancreatic cystic lesions would be a much broader subject to review and is beyond the scope of our current paper that focuses on pancreatic masses.

2. In addition we have recent information about the use of fenestrated needle to increase the rate of adequacy when the cytopathology is not available for immediate evaluation.

We have included the 2 randomized studies evaluating EUS-FNA of pancreatic masses when cytopathology is not available (references 52 and 53). We have also included the randomized studies performed evaluating the fenestrated needle (ProCore, Cook Medical, Bloomington, IN) as reference 59.

3. I suggest to delete in the bibliography the citation of "retrospective study" about the comparison of 22 and 25 gauge needle and mention prospective studies.

We have only included prospective studies comparing 22 and 25 gauge needles with the exception of the metaanalysis that is appropriate to include in this review.

4. The paper 26 should be cancel because are enrolled only 24 pts and at now the information of this paper is considered false

We have deleted previously cited paper 26.

Thank you again reviewing our work as the comments were excellent and very helpful.

Sincerely,

The Authors;

Andrew C. Storm, MD
Linda S. Lee, MD