

Li-Jun Cui

Science Editor, Editorial Office

Baishideng Publishing Group Inc

World Journal of Gastrointestinal Endoscopy

Dear Editor

Subject: Submission of revised paper "Off label use of lumen-apposing metal stent for persistent gastro-jejunal anastomotic stricture". Manuscript No: 37483.

Thank you for your email dated 7<sup>th</sup> March 2018 enclosing the reviewer's comments. We have carefully reviewed the comments of the reviewer and the editor and have revised the manuscript accordingly. Our responses are given in a point-by-point manner below. Changes to the manuscript are shown in highlight.

We hope the revised version is now suitable for publication and look forward to hearing from you in due course.

Sincerely,

Muhammad Sohail Mansoor

Gastroenterology Fellow

Albany Medical Center, NY

## **Response to Reviewer:**

We thank you for the careful and thorough reading of our manuscript and the constructive and thoughtful suggestions/comments which will help us improve the quality of this manuscript.

### **1. Reviewer Comment:**

*Introduction: the authors provide no references for their claims that:*

- *GJ stricture is a late complication of Roux Y gastric bypass.*
- *Pneumatic dilation is used to manage GJ strictures.*
- *“fcSEMS” (not defined by the authors) has a high rate of adverse events in managing GJ strictures.*

### **Reply:**

Authors added reference to the above statement. (reference # 2,3 and 4)

### **2. Reviewer Comment:**

Introduction:

The authors provide no reason for consideration of using a “LAMS” (again not defined by the authors)

### **Reply:**

As suggested by the reviewer we added the explanation for choosing LAMS in introduction:

“In this case report we present a case of GJ anastomotic stricture successfully managed with LAMS after failure of serial balloon dilations and steroid injections.”

### **3. Reviewer Comment:**

The authors provide no discussion about other (cheaper) published treatments for management of recurrent benign strictures, such as Triamcinolone injection therapy.

### **Reply:**

As suggested by the reviewer we revised the introduction to mention all standard treatment options for GJ anastomotic strictures:

“Initially this is typically managed safely with pneumatic dilation. Alternatives to dilation include needle-knife incisional therapy, steroid injection and fcSEMS. LAMS was preferred over fcSEMS to avoid the high rate of complications.”

#### **4. Reviewer Comment:**

Introduction:

What new issue does this case report describe that adds to our present literature in this field (e.g. references 17 and 18).

#### **Reply:**

Added to 2<sup>nd</sup> last paragraph of discussion:

LAMS was utilized here due to stricture caused by ulceration induced stenosis and not purely “anastomotic stricture”, there was fibrosis from multiple prior dilation attempts. The manufacturer recommendation on LAMS duration for cystogastrostomy is four weeks. For off-label use the commonly used duration is three months[ref 16, 17 (previous draft ref: 17,18)], we intend to keep it in for six months for maximal effect and to prevent stricture recurrence/stent replacement.

#### **5. Reviewer Comment:**

Case Report:

“complicated by GJ anastomotic ulcer”; when?

#### **Reply:**

As suggested by the reviewer we mentioned when the GJ anastomosis was complicated by ulceration in “case report” section:

“A 42-year-old female with history of RYGB performed seven years ago, complicated by GJ anastomotic ulcer three years ago was seen in follow-up for symptomatic GJ anastomotic stricture.”

#### **6. Reviewer Comment:**

Was a gastro-jejunal ulcer present when dilation was attempted?

#### **Reply:**

The gastro-jejunal ulcer had healed before dilation was attempted.

**7. Reviewer Comment:**

Did the gastro-jejunal ulcer heal prior to stent placement?

**Reply:**

The gastro-jejunal ulcer had healed prior to stent placement.

**8. Reviewer Comment:**

Was the patient given a hydrogen-potassium ATPase inhibitor?

**Reply:**

The patient was taking hydrogen-potassium ATPase inhibitor 40mg Bid before the gastro-jejunal ulcer was healed and 40mg once per day afterwards.

**9. Reviewer Comment:**

Was the patient given misoprostol?

**Reply:**

Patient did not receive any misoprostol.

**10. Reviewer Comment:**

What is patient's BMI?

**Reply:**

As suggested by the reviewer we mentioned patient's BMI in case report i.e. "18.79".

**11. Reviewer Comment:**

What is patient's obstructive sleep apnea status?

**Reply:**

Patient did not have obstructive sleep apnea.

**12. Reviewer Comment:**

Is patient using a non-steroidal anti-inflammatory drug?

**Reply:**

Patient was not using a non-steroidal anti-inflammatory drug.

**13.Reviewer Comment:**

Is patient smoking?

**Reply:**

Authors added the statement regarding patient's smoking status:

“she had decreased her smoking from one pack per day to three cigarettes per day.”

**14.Reviewer Comment:**

Does patient have a gastro-gastric fistula?

**Reply:**

Patient did not have a gastro-gastric fistula.

**15.Reviewer Comment:**

What is patient's H. pylori status?

**Reply:**

Patient had random gastric biopsies on last esophagogastroduodenoscopy which came back negative H. pylori infection while stool antigen also came back negative.

**16.Reviewer Comment:**

What is patient's Sarcina species status?

**Reply:**

Patient's Sarcinia species status was not checked.

**17.Reviewer Comment:**

Did the patient's weight change after the stent was placed?

**Reply:**

As suggested by the reviewer we added the statement:

“patient had gained 5 pounds on three-month follow-up”

**18.Reviewer Comment:**

Unable to tolerate which foods orally?

**Reply:**

As suggested by the reviewer we edited the following statement:

“She reported weakness, fatigue and a 50-pound weight loss over the past year due to her inability to tolerate both solids and liquids food orally”

**19.Reviewer Comment:**

There should be a description of permission from the authors’ Human Studies subcommittee in this case report.

**Reply:**

The Certificate of Approval was submitted from “Albany Medical Center Committee on Research involving Human Subjects Institutional Review Board (IRB).”

**20.Reviewer Comment:**

Why have the authors not removed this stent?

**Reply:**

Our plan is to remove the stent after 6 months for maximal effect.

**21.Edits made per suggestions of Editor and Journal Guidelines:**

- a) Title page: Name of Journal changed to World Journal of Gastrointestinal Endoscopy as suggested by Editor.
- b) Title page: Manuscript number added as suggested by Editor.
- c) Title page: Copyright License Agreement uploaded as suggested by Editor.
- d) Title page: Running title added as suggested by Editor.
- e) Title page: Added informed consent statement as suggested by Editor.
- f) Title page: Added Institution name under "Supported by".
- g) Title page: Added CARE Checklist (2013) statement per Journal guidelines.
- h) Title page: Added open access statement per Journal guidelines.
- i) Title page: Audio Core tip uploaded as suggested by the Editor.
- j) Title page: Copyright statement added per Journal guidelines.
- k) Added section "Citation" per Journal guidelines.
- l) Changed all references style per Journal guidelines.
- m) Added article highlights per Journal guidelines.