

ANSWERING REVIEWERS



June 25, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 3768-revised.doc).

Title: Photodynamic therapy for high-grade dysplasia lesions of bile duct via choledochoscope

Author: Jiang-jiao Zhou, Li Xiong, Qing-long Li, Ying Gu, Yu Wen, Xiao-feng Deng, Xiong-ying Miao

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 3768

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated, and manuscripts has been edited by Jing-Yun Ma Editorial Office for language evaluation.

2 Revision has been made according to the suggestions of the reviewer

(1)Comments To Authors by Reviewer NO. 00054317: This is an instructive case report. Their needs to be at least a gross photo and a histologic slide of the dysplasia to go along with case report. Also, there needs to be some form of IRB informed consent on performing a highly experimental treatment with unknown benefit and morbidity.

Answer to reviewer: Gross features of the lesion could be seen clearly in the Figure2A,we don't think it is necessary to add another gross photo of the dysplasia. All invasive procedure in our hospital need informed consent, also we got PDT informed consent from this patient.

Revision: 1.Added a histologic slide which showed moderate-high grade dysplasia of the distal common bile duct lesion. 2. Notify the fact that we got PDT informed consent from the patient before PDT in the manuscript.

(2)Comments To Authors by Reviewer NO. 01212476: I think it is a very interesting topic and the manuscript can be published if some information about the case could be provided. I recommend to the author to add some histology evidences of the diagnosis and more information about long term follow-up as it can be as reference for future manuscripts.

Answer to reviewer: We had pathological results of the lesion before PDT. The patient undergone PDT on August 1st 2012, and the latest follow-up by choledochoscope was in March 2013 which showed the bile duct was patent and the patient was asymptomatic.

Revision: 1.Added a histologic slide before PDT which showed moderate-high grade dysplasia of the distal common bile duct lesion. 2. Report the latest results of following-up by choledochoscope in the manuscript.

(3)Comments To Authors by Reviewer NO.01076129: The paper describes how photodynamic therapy can be used to treat early cholangiocarcinoma. The authors state that it is the first successful treatment of high grade dysplasia with photodynamic therapy, There are, however, numerous reports of palliative treatment with photodynamic therapy for cholangiocarcinomas of advanced stage. The previous experience of phvase study, Photodynamic therapy should be presented to motify a single-case study. The treatment of the patient before the photodynamic therapy should be given in more detail. About two months before the choledochotomy, a "first operation" was performed. What

was that operation? A thorough language editing is needed.

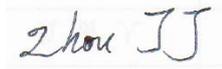
Answer to reviewer: Actually there were lots of reports of PDT for unresectable cholangiocarcinomas. But there was no report of PDT for high grade dysplasia or carcinoma in situ located in the distal common bile duct. It is quite different between these two situations. For unresectable cholangiocarcinomas, it is impossible to perform radical resection, so PDT is a kind of palliative treatment. For high grade dysplasia lesions of distal common bile duct, it could be resected to avoid canceration, but the resection procedure is with high risks of complication and mortality. It is controversial to do such high risk operation just in order to prevent the carcinoma that could not be exist. So we believe PDT is a promising procedure when came to similar situations. What we mentioned as "first operation" in the manuscript indicated previous common bile duct exploration and T-tube drainage for obstructive jaundice caused by the lesion.

Revision: We have already sought for help for language editing.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

A handwritten signature in black ink that reads "Zhou JJ". The signature is written in a cursive style with a light blue rectangular background behind it.

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