

ANSWERING REVIEWERS

October 1, 2013

Dear Editor,

Please find enclosed the edited the full-text manuscript in Word format



Title: A rare granulation polyp arising from a colon diverticulum after repeated recurrent diverticulitis

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ESPS Manuscript NO: 5101

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

1. Format has been updated
2. Revision has been made according to the suggestions of the reviewer
3. References and typesetting were corrected

All responses to comments are as following pages.

Sincerely yours,

Hirohito Mori, MD, PhD

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REVIEWER #1 (504725)

COMMENT

Does this case report require 11 authors?

RESPONSE

As you pointed out, there are so many co-authors. Although they contributed to my manuscript, but there were a little differences in contribution degrees. I deleted two co-authors from my manuscript (Page 1, line 11-12, 15) (Page 1, line 24- Page 2, line 1) (RED FONT). Thank you for your kind advises.

REVIEWER #2 (722837)

COMMENT

The Title could have been better e.g " Endoscopic management of a rare granulation polyp in a colonic diverticulum".

RESPONSE

Thank you very much for your more excellent title. I changed our title as you recommended (Page 1, line 5-6) (RED FONT) as follows:

Endoscopic management of a rare granulation polyp in a colonic diverticulum

COMMENT

A good rare case but manuscript could be better without repeating the same sentences in the abstract and case report.

RESPONSE

As you pointed out, there were some repeating same sentences in the abstract and case report. We revised and deleted INTRODUCTION section (Page 4, line8- 17) as follows:

As the incidence of colonic diverticular bleeding is increasing, treatments are not yet well established. The risk factors contributing to recurrent hemorrhage after initial improvement of colonic diverticular bleeding were past histories of hypertension or renal deficiency. Follow up colonoscopy (CS) after the initial improvement of colonic diverticular bleeding is needed in patients with hypertension or renal deficiency^[4].

In addition, local peritonitis due to diverticulitis and perforation are one of the serious complications^[5]. Although 85% of colonic diverticulitis will recover with a nonoperative treatment, some patients may have complications such as abscesses, fistulas, obstruction and panperitonitis^[6,7]. On the other hand, few articles have examined neoplasms that arise from the diverticulum, such as adenoma and adenocarcinoma^[8]

We experienced a rare case of a granulomatous polyp arose from a colon diverticulum.

and DISCUSSION section (Page 7, line 3- 4) as follows:

Colon diverticulum causes some serious complications such as bleeding, stricture due to multiple recurrences of diverticulitis and perforation^[5-7].

COMMENT

Describe what you mean when using any abbreviations e.g CS.

RESPONSE

I am very sorry that I made a careless mistake. We revised (Page 5, line 3) CS to colonoscopy, and (Page 6, line 3) OTSC to over-the-scope clip (OTSC).

Sincerely yours,

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