AUTHORS' RESPONSES TO THE REVIEWERS' COMMENTS

July 07, 2022

Jin-Lei Wang

Company Editor-in-Chief, Editorial Office

Baishideng Publishing Group Inc

Dear Editor:

I wish to resubmit a Case Report for publication in *World Journal of Clinical Cases*, titled "**Complete colonic duplication presenting as hip fistula in an adult with pelvic malformation: a case report**." The paper was coauthored by Jingtao Bi, Zhixue Zheng and Yaqi Liu. The manuscript ID is 77383.

The manuscript has been rechecked and appropriate changes have been made in accordance with the reviewers' suggestions. The responses to their comments have been prepared and attached herewith.

We thank you and the reviewers for your thoughtful suggestions and insights, which have enriched the manuscript and produced a better and more balanced account of the research. We hope that the revised manuscript is now suitable for publication in your journal.

Thank you for your consideration. I look forward to hearing from you.

Sincerely,

Xuan Cai

Department of General Surgery, Beijing Jishuitan Hospital, 31 Xinjiekou East Street, Xicheng District, Beijing 100035, China

Phone number: +8618311136351

E-mail address: cx05011010025@gmail.co

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Response: The authors would like to thank the reviewer for his/her constructive critique to improve the manuscript. We have made every effort to address the issues raised and to respond to all comments. The revisions are indicated in red font in the revised manuscript. Please, find next a detailed, point-by-point response to the reviewer's comments. We hope that our revisions would meet the reviewer's expectations.

1. First of all, please note that we have added two key words so as to meet the journal requirements. The key words are as follows:

"**Key words:** Abdominal pain; Colonic duplication; Computed tomography; Hip fistula; Pelvic malformation; Laparoscopy" (Lines 53–54)

2. Concerning the definition of pelvic malformation, please note that in this case, the structure of the pelvis was abnormal, including the sacrum, ischium, and some other bony structures. More information is presented in "Imaging examination" subsection and in Figure 1D.
3. Further, as per the reviewer's suggestion, we have enhanced our discussion concerning the differential diagnosis of hip bulging as follows:

"Considering that the fistula and neoplasm may be a hip bursitis or common infected sinus tract can easily lead to missing further inspection and delayed treatment. In most cases, an ultrasound examination may help detect the problem and exclude most differential diagnosis[12]." (Lines 236–240)

4. Moreover, we would like to thank the reviewer for the suggestion to discuss the approach to hip bulge. However, there was no hip bulge in our case. We agree with the reviewer that ultrasound examination may help rule out hernias or other causes of bulging, such as gastrointestinal tract anomalies. We have discussed this issue and cited the suggested work (Reference #12). The added part is as follows:

"Considering that the fistula and neoplasm may be a hip bursitis or common infected sinus tract can easily lead to missing further inspection and delayed treatment. In most cases, an ultrasound examination may help detect the problem and exclude most differential diagnosis[12]." (Lines 236–240)

5. In addition, we have cited Figure 1B in the main text, and provided the appropriate information concerning this image as follows:

"Combined contrast-enhanced computed tomography (CT) with contrast fistulography revealed a large, dilated lumen structure with a large amount of stored feces in the abdominal pelvic cavity (Figure 1B)." (Lines 130–132)

6. Finally, please note that Figure 1C presents the contrast agent appearing in the fistula. Before taking CT scans, the contrast agent was injected into the tract from the right hip fistula to specify the construction

of this fistula. The duplicated tube was located beneath the visceral peritoneum. The tube was a complete colonic duplication and bulged from retroperitoneal that could be showed on coronal CT scan (Figure 1B). However, on axial view, the tube went into the pelvic floor and finally behind the normal intestines connected with the fistula.

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All queries are put directly in the word document of the manuscript as "Comments"

Modified in the article.