



**Response letter to the Reviewers:**

1) “Any manuscript describing a study (basic research and clinical research) that used biostatistics must include a statement in the Materials and Methods section affirming that the statistical review of the study was performed by a biomedical statistician....”

Answer:

The sentence “The statistical review of the study was performed by a biomedical statistician” was added to Materials and Methods section.

2) Please write the comments.

*Writing requirements for each subsection*

**(1) Background**

To summarize concisely and accurately the relevant background information so that readers may gain some basic knowledge about your study’s relevance and understand its significance for the field as a whole.

Answer:

The following background was added in the text: “Endovascular aortic aneurysm repair (EVAR) is a safe technique associated with a significant reduction in perioperative mortality and morbidity compared to open repair. The technical success of stent-graft implantation is well known but after aortic-endovascular replacement, several medium- and long-term complications have been observed in cases of lifelong surveillance. Follow-up of EVAR is therefore essential to promptly diagnose and treat graft complications”

**(2) Research frontiers**

To introduce briefly the current hotspots or important areas in the research field as related to your study.



Answer:

The following research frontiers was added in the text: “Current EVAR follow-up guidelines suggest CTA as the best method for detecting graft complications and endoleaks. The primary aim of this project is to find a new way to perform the EVAR follow-up, tailoring the imaging protocol per single patient, with a significant reduction of dose-exposure and risk of CIN”.

### **(3) Innovations and breakthroughs**

To summarize and emphasize the differences, particularly the advances, achievements, innovations and breakthroughs, as compared to other related or similar studies in the literature, which will allow the readers to assimilate the major points of your article.

Answer:

The following Innovations and breakthroughs was added in the text: “ To be known, this is the first study using digital tomosynthesis of the abdomen (DTA), combined with contrast enhanced ultrasound (CEUS) in assessing complications after endovascular aortic aneurysm repair (EVAR), assuming Computed Tomography Angiography (CTA) as gold standard”.

### **(4) Applications**

To summarize the practical applications of your research findings, so that readers may understand the perspectives by which this study will affect the field and future research.

Answer:

The following Applications was added in the text: “Our results confirm the possibility of using DTA combined with CEUS as a cost-effective diagnostic protocol alternative to CTA in EVAR follow-up, with the potential to limit the use of CTA in doubtful cases and in cases requiring reintervention or with an unfavorable anatomy, significantly reducing costs and risk of CIN as well as overall radiation dose received by patients”.

**(5) Terminology**

To describe concisely and accurately any terms that may not be familiar to the majority of the readers, but which are essential for understanding your article.

Answer:

The following Terminology was added in the text:

Digital tomosynthesis of the abdomen (DTA)

Contrast enhanced ultrasound (CEUS)

Endovascular aortic aneurysm repair (EVAR)

Computed Tomography Angiography (CTA)

Magnetic Resonance Angiography (MRA)

Doppler ultrasound (DU)

3) Reference 25: Repeat with ref 7, please correct it.

Answer: The reference 7 was deleted and substituted as following : “**Perini P**, Sediri I, Midulla M, Delsart P, Mouton S, Gautier C, Pruvo JP, Haulon S. Single-centre prospective comparison between contrast-enhanced ultrasound and computed tomography angiography after EVAR. *Eur J Vasc Endovasc Surg* 2011; **42**: 797-802. doi: 10.1016/j.ejvs.2011.09.003, [PMID: 21962588]”.

4) Would you please provide the decomposable figure, whose parts are movable and words can be edited.

Answer: It is not possible to provide the decomposable figure, because it was imported by the article ref 4, as reported in the title of Graph 1. We have provided a similar Graph hoping this could be better for manuscript editing.

5) Please mark the location of the figure in the text.

Answer: The location of the figure was marked in the text.



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### 6) REVIEWER 1:

The study was well designed and performed, the results well supported their conclusion. And the manuscript was well organized as well. except the following minor weakness: 1. As we know, CEUS depends on operator very much. The author didn't state the experience of the scanner. 2. The sensitivity, specificity, PPV, NPV, and accuracy was calculated based on patients, why not by complications? 3. minor spelling errors: "thet" "standar" .

#### Answer:

1) Dear Reviewer, thank you for your comment. I agree with the statement that CEUS depends on operator very much. I added the years of expertise of the CEUS operator in the manuscript (blue color).

2) Dear Reviewer, thank you for your comment. Considering the scarceness of the number of complications we prefer to assess the sensitivity, specificity, PPV, NPV, and accuracy based on patients number. The second reason of this choice was that all patients were treated on the basis of their comulative life-risk due the severity of complications/endoleaks. We trust this is acceptable for you.

3) Dear Reviewer, thank you for your comment.

#### Answer:

Dear Reviewer, thank you for your comment. Minor spelling errors were corrected.

### 7) REVIEWER 2:

This manuscript compared three methods for detection of EVAR complications. This manuscript is well written and clearly presented. Information from this study could be important for readers working in this area. Minor errors: EVAR, PPV and NPV should be spelled out in the first time used in ABSTRACT.

#### Answer:

Dear Reviewer, thank you for your comment. The acronyms EVAR, PPV and NPV were spelled out in the first time used in the ABSTRACT.



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