

## Format for ANSWERING REVIEWERS



January 1, 2015

Dear Editor,

Please find enclosed the edited manuscript in word format (file name: ESPS Manuscript No.14979-Review.doc).

**Title:** Thoracoabdominal pseudocyst of pancreas-An rare location, managed by retrocolic retrogastric Roux-en-Y cystojejunostomy

**Author:** Kamble Ravikiran Shankar, Gupta Rahulkumar, Gupta Abhaya R, Kothari Paras Rashmikant, Dikshit K Vishesh, Kekre Geeta Anil, Patil Prashant Sadashiv

**Name of Journal:** *World Journal of Gastrointestinal Surgery*

**ESPS Manuscript NO:** 14979

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:

**Reviewer 02544259**

**Comments:** Your manuscript is very interesting. And your manuscript deserve our journal of publication. I am pleased, 10-year-old girl is in good spirits. Please increasingly hard in the future.

**Reply:** Thank you.

**Reviewer 00505458**

**Comments:** What about common channel syndrome as cause for pancreatitis in children?

**Reply:** MRCP of the patient did not demonstrated any abnormal pancreato-biliary junction abnormality. Postoperatively patient is in regular follow up and doing fine without any exacerbation of pancreatitis.

**Reviewer 00053659**

**Comments:** Kambe reported a case who had a pseudocyst locating retorooperitoneo-retormediastinal space and managed by retrocolic retrogastric Roux-en-Y cystojejunostomy. Anatomical nomenclature should be corrected where the location is retro-mediastinal space. As the author mentioned the discussion for general case, etiology and strategy for this specific patient should be mentioned or estimated. Especially, the risk and result between surgical approach and endoscopic approach should be compared. In addition, they should defend the reason for avoiding percutaneous approach. Overall quality of the paper and clinical approach is not appropriate. However, if the author could show the option for the future case with high quality images, it would be worth. Please present more images such as T1, T2 MRI, axial CT, and US.

**Reply:** Nomenclature is correct as the roux-en-Y loop brought retrocolic and retrogastric for the anastomosis.

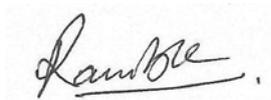
Due to presence of major vessels near the cyst and thoraco-abdominal extension of cyst, radiologist could not get a safe window for percutaneous needle aspiration.

Concerned Images are attached. Image quality in doc file will be relatively lower, if needed I can provide original size images have better resolution.

3 References and typesetting were corrected

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

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Ravikiran Kamble', with a horizontal line underneath the name.

Dr Ravikiran Kamble,  
MCh Pediatric Surgery,  
Department of Pediatric Surgery.  
LTMMC and LTMG Hospital Sion Mumbai,  
Maharashtra, INDIA 400022  
E-mail id -drkambleravi80@gmail.com  
Mobile no: +91-9850969474